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ABSTRACT

These materials consist of: (1) a planning and implementation handbook designed to help Head Start managers better understand, plan, and implement a more comprehensive aproach to health education and health promotion--one that addresses local needs and tailors programs to the needs of the children, parents, and staff; and (2) a resource guide that suggests programs, tools, and practical strategies for assessing existing health curricula for children, parents, and staff and that provides information on materials and organizations to help Head Start programs design their own health education and further their health promotion efforts. The cases presented throughout the handbook reflect day-to-day issues and health concerns of Head Start staff and families and are based on interviews and discussions with Head Start managers and staff throughout the country. The guide suggests criteria for choosing health curricula; an annotated listing of 250 health-related resources, including print and audiovisual resources for adult personal health and resources for use with children; and subject and title indexes for all resources listed. (The handbook contains 18 references, and the guide contains 10 references.) (CK)

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CHOOSING WELLNESS

ED 398 206

Comprehensive Health Education *Planning and Implementation Handbook*

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A Handbook for Head Start Programs

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Choosing Wellness:
Comprehensive Health Education Planning and Implementation Handbook

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with
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Developed by EDC
for Head Start through funding by
Johnson & Johnson

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The Scope of the Problem

Since 1965 the needs of the children and families served by Head Start have become more complex, as have those of our society in general. Concerned teachers report seeing children who are more aggressive, impulsive, or withdrawn than in the past (Lang, 1992). Families are stressed by greater poverty, diminished support systems, unavailable health services, and increased health, environmental, and social problems. Consider the following statistics.

. . . children need to be healthy to learn, and they need to be well-educated to stay healthy.

McGinnis and DeGraw, 1991

- The United States has one of the highest infant mortality rates of any industrialized nation. Death rates for black children are twice as high as those for white children (Children's Defense Fund, 1991).
- Childhood injury is the principal public health problem in America today, causing more deaths than all childhood diseases combined and contributing greatly to childhood disabilities (Children's Safety Network, 1991).
- Homicide is the second-leading cause of injury death among children and adolescents. In 1988, 9 children a day (3,290 children per year) were victims of homicide in the United States (Children's Safety Network, 1991).
- Approximately 2,000 children in this country have been diagnosed with AIDS and 13,000 are predicted to develop AIDS by the year 2000 (Martin, 1992).
- The leading cause of injury to women between the ages of 15 and 44 is domestic abuse.
- Approximately one in five preschoolers lives with an adult who is abusing alcohol or other substances (Collins and Anderson, undated). Abuse of alcohol and the use of other substances are highly correlated with domestic and community violence, child physical and sexual abuse, and child neglect.
- In the U.S. an estimated one in eight children under the age of 12 (5.5 million) is suffering from hunger (Martin, 1992).
- Lead poisoning and poverty are positively correlated. Furthermore, black children under six years old have six times the rate of elevated blood levels, compared to their white peers (12.2 to 2 percent) and black inner-city children have nine times this amount (18.6 percent) (Sidel, 1992).
- If tobacco use stopped entirely today throughout the nation, an estimated 390,000 fewer Americans would die before their time each year (U.S. Department of Health and Human Services, 1990).
- An American's overall health and access to quality health care are dependent on where he/she lives, the color of his/her skin, and his/her level of education (*The Nation's Health*, 1993).

The health and well-being of Head Start children and families are threatened by poverty and community issues related to poverty . . . But people who are on the economic edge have the most to gain from health education. Health education will help them stay well.

Head Start Health Coordinator

Head Start staff members work every day with families and communities facing these problems, spending much of their time trying to find and access essential yet scarce health services for low income families. At the same time, Head Start staff members have become increasingly aware that efforts in prevention are also needed. For Head Start programs, an overarching challenge is to find ways, with the resources available, to both promote prevention and respond to the many health-related needs of children and families.

A Working Solution

Health education for children and families has always been a part of Head Start's mandate. Comprehensive health education, an approach that goes beyond current practices, can help Head Start programs improve the health and well-being of children, families, and staff, as well.

Comprehensive health education addresses a wide range of topics related to physical, mental, emotional, and social health. It also strengthens and reinforces the skills needed to be healthy, such as skill in communication, decision-making, risk assessment, and advocacy. Such skill building is essential for fostering healthier individual behaviors, as well as changing the social and environmental factors that negatively affect health.

Comprehensive health education is based on a set of beliefs that recognizes the value of educating people about:

- prevention of injury and disease, and protection of health
- health risks and health-promoting behaviors
- the importance of modeling as well as discussing healthy behaviors
- the role of advocacy and the need to create community norms in support of health
- the broad nature of health and well-being
- the interrelatedness of all the factors that influence health

Below are some common questions and answers regarding comprehensive health education.

Common Questions and Answers

Q **We do health education programs all the time. How is comprehensive health education different than what we're doing now?**

A Many Head Start programs are taking steps—on behalf of themselves and others—to prevent injury and disease, advocate for changes in the community and in society, and improve the health and well-being of children. For example, Head Start programs offer training sessions for staff and parents on such topics as mental health, hygiene, child care, nutrition, and health services (e.g., immunizations, lead screenings, and dental checkups). However, broadening the definition of health education allows it to be integrated into all aspects of program planning. Comprehensive health education addresses all topic areas that affect our physical, social, and emotional well-being. As such, it is a cross-component effort in Head Start. In addition, comprehensive health education addresses not only the needs of children and families, but Head Start staff as well.

Q **What is involved?**

A Comprehensive health education programs are tailored to meet the specific health needs of children, families, and staff in the local program. As a result, comprehensive health education looks different from program to program, and changes within programs over time. Activities might address a range of topics such as parenting, emotional health, prevention of alcohol and substance abuse, nutrition and fitness, injury prevention, violence prevention, and consumer health. An essential aspect of comprehensive health education is its focus on building and reinforcing the skills needed to be healthy throughout life. Changing individual behaviors is part of the picture. Comprehensive health education also emphasizes building advocacy and activism skills to change those environmental and social forces—such as poverty, racism, unavailable health services, and influence of community norms—that pose significant health risks to Head Start children, families, and staff.

Q What are the benefits?

A A comprehensive, programwide approach is essential to any health-promoting program. Knowledge and skill building will empower people to better care for themselves and others, change their communities, and lead healthier and more productive lives. Comprehensive health education can have a lifelong impact on attitudes about health and wellness and health-promoting behaviors.

Q But do we have the time?

A Head Start programs are already spending time on promoting health and providing health education to children and families. A more comprehensive approach to health education—one that is broadly defined and cross-component in its reach, focused on building skills, and integrated for children, families, and staff—might take extra time at the outset. Yet programs report that the benefits outweigh the initial costs. Everyone in the program gains when health is valued and health messages are integrated, responsive, and reinforced for children, parents, and staff. Besides, when staff model healthy behaviors, they provide a powerful health education message to children and families. Such modeling takes no extra time but reaps benefits not only to the staff who are becoming healthier, but to the families and children they serve as well.

Education for health empowers through the development of understanding, motivation, and skills.

Kreuter and Green, 1992

Head Start programs throughout the country are realizing the benefits of a more comprehensive approach to health education and the value of promoting prevention and wellness to children, families, and staff. The case on the following page illustrates these benefits.

"Personal wellness is the basis for everything we do," says the health coordinator for a program in Idaho. "And one of the things we say a lot is that you can't sell what you don't have." In an effort to help staff and parents develop healthier lifestyles, the health coordinator and her director got together with other staff members. Together, they decided that losing weight would be a "wellness" goal. Each staff member set an individual goal. Some focused on reducing fat, sugar, and salt in their diets. Others changed from drinking soda to drinking water, or started walking. They each attended a "wellness" class offered at a local community college and read up on nutrition, diet, exercise, and other information related to losing weight. The staff then offered a similar wellness lesson to each of the 238 families in the program, and developed a variety of activities to promote health.

The health coordinator comments, "It's been fun to watch in the last few years how people have integrated [healthy habits] into their classrooms and into their own lifestyles." Staff and parents are exercising more and eating better, and so are the children. Together, they are building healthier life styles. "Now it's a part of the way we live . . . we're role models for each other."

Using This Handbook

This handbook aims to build on what Head Start programs are already doing to provide health education to young children and their families. It is designed to help Head Start managers better understand, plan, and implement a more comprehensive approach to health education and health promotion—one that addresses local needs and tailors programs to the needs of the children, parents, and staff. Such a comprehensive approach addresses individual program priorities, while strengthening and reinforcing the skills people need to make healthy choices and decisions throughout life.

This handbook provides a definition and rationale for comprehensive health education, practical strategies for assessing health risks and needs, and ideas for planning and implementing effective and empowering programs. It is divided into six chapters: Introduction, The Health Education Team, Planning Health Education Programs, Designing Health Education Programs, Making It Work, and Conclusion. The Addendum offers suggestions for relating health education and health promotion activities to the *Head Start Program Performance Standards*. The cases presented throughout this handbook reflect the day-to-day issues and health concerns of Head Start staff and families. They are based on interviews and discussions with Head Start managers and staff throughout the country.

By increasing our awareness of health education for children, we are also increasing our awareness of health education for ourselves and our families. And when we put those three groups together and make a commitment to being healthy together, we have the basis for tremendous growth, advancement, and support for each other.

Head Start Teacher and Special Services Liaison

This handbook is part of *Choosing Wellness*, a health education package for Head Start programs funded by Johnson & Johnson. The package also includes a promotional video and print materials, and a resource guide listing more than 250 health education materials and resource organizations. We hope that together these materials will assist Head Start programs in further reducing risk; preventing unnecessary illness and injury; becoming stronger advocates; and promoting wellness in themselves, the families and children they serve, and the communities in which they live.

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CHAPTER I

THE HEALTH EDUCATION TEAM

CHAPTER I

THE HEALTH EDUCATION TEAM

The Management Team

The Role of the Head Start Director

Exhibit 1 (Sample Memo)

The Role of the Coordinators

The Role of the Health Services Advisory Committee (HSAC)

Exhibit 2 (Sample Memo)

Summary

Essential ingredients needed for successful comprehensive health education programs include the support, understanding, and promotion from the director and the management team, and a health education "team" standing solidly behind the effort. The health education team might consist of the management team (the director, with health, education, parent involvement, social services, and disabilities services coordinators) and members of the Health Services Advisory Committee (HSAC). Other members might include "frontline" staff such as teachers, cooks, and family service workers. A team representing all aspects of the program will foster staff "buy in" and help avoid logistical problems. Working cooperatively, this group will take the lead in initiating, promoting, and ensuring the success of a comprehensive health education initiative.

The Management Team

The role of the management team in instituting a new comprehensive health education campaign is to:

- Create awareness of the importance and benefits of health education and health promotion.
- Create a supportive, enthusiastic, and friendly environment to allow for the free exchange of concerns and ideas among staff, parents, and children.
- Recognize and affirm the role of all staff members in providing health education and health promotion.
- Create a thoughtful, effective, and well-planned system to assess health needs and risks, and channel issues, concerns, and ideas.
- Formulate innovative and creative activities, programs, and materials to meet the health education needs of the Head Start community.
- Recognize when additional training is needed and provide relevant training opportunities.
- Continually evaluate and assess programs, making changes when necessary.

The Role of the Head Start Director

By providing guidance and direction, the Head Start director will be able to facilitate the creation of a staff team effort, as well as encourage the participation of families and the community. The personal commitment and modeling of the Head Start director will help ensure the success of a comprehensive health education program. As one Head Start health services manager said, "Leadership is the

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key to promoting health education. If you have support, encouragement, and practical assistance from the director, the effort will be successful."

Creating *awareness* of the importance, definition, and benefits of health education is a useful way to set a positive tone and help orient staff and parents. At first this may be as simple as encouraging everyone—from bus drivers to cooks, from teachers to managers—to "tune in" to the health-related concerns and risks of children, parents, and staff. This also helps send the message that communication is a key element in comprehensive health education. The director promotes health awareness by helping the staff, along with children and families, to become aware of their own health needs and risks, and by offering appropriate programs. The director encourages participation on community health or mental health boards, as well as the program's Health Services Advisory Committee.

Education for parents cannot be narrowly defined. It needs to include parents, friends, grandparents, older siblings . . . anyone who cares for the child and is part of the child's family.

Head Start Parent Involvement Coordinator

The director is essential in providing guidance and direction—overseeing or devising methods of assessment, planning activities and interventions, and evaluating the results. The director also incorporates input from staff (at all levels) and parents, and provides information to all decision-making and advisory groups regarding the adoption and implementation of comprehensive health education. Inviting and welcoming full staff and parent input, from the beginning, is an important way to ensure success.

The director (or designee) also must introduce comprehensive health education as a worthwhile and exciting initiative. Some ways to accomplish this are:

- Conduct a well-publicized kickoff event, such as a health fair, guest speaker, or programwide project.
- Give an enthusiastic presentation about health education at a preservice orientation for new and returning staff.
- Introduce a health education activity that will respond to a specific need and have an immediate impact.
- Provide a brief overview of the program's philosophy regarding health education in a staff memo or parent newsletter, highlighting the benefits to children's development and educational performance.

A sample memo (Exhibit 1) on the following page invites Head Start families and staff to join in a kickoff "clean-up event."

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Exhibit 1

Sample Memo

To: All staff, parents, Health Services Advisory Committee Members, Policy Council Members

From: Sandy Moller, Program Director

Re: Resuming Our Health Initiative:
"Keeping Our Community Healthy"

The health education planning team met several times last year to discuss two health issues that we identified as the most pressing for our program. They are:

- **Our shape**—Most of us seem to be battling with our hips and waistlines!
- **Our community's shape**—Specifically, the shabby and dangerous state of the Washington Street and Line Street playgrounds.

Through the hard work of the planning team and our city government, we are proud to launch the second annual kickoff of the "Keeping Our Community Healthy" program. As a first step, we will meet on **Saturday, October 17 at 10:00 a. m. at the Lincoln Avenue site.**

We will need parents, staff, and friends to:

- pick up garbage (we'll provide gloves!)
- clean and scrub
- rake and shovel
- paint
- plant

You will receive:

- exercise and fresh air
- good company and lots of laughs
- a delicious and healthy lunch
- clean and beautiful community parks
- transportation and baby-sitting
- merit points*

** Merit points will be earned again this year by participating staff and parents to be redeemed at the end of the year for prizes and awards.*

Information and sign-up sheets, with specific jobs, are posted on my office door. The coordinators and I will be calling you too! Please stop by to sign up or ask me any questions you might have. See you on the 17th!

LET'S HAVE FUN, TAKE BACK OUR PARK, AND GET IN SHAPE!!

Our administrator should be commended for her outstanding dedication . . . she serves as a role model to us all and works really hard to ensure that the children's needs are met. I guess that's why we feel we have such a great health program.

Head Start Health Coordinator

As the case below shows, exploring the health risks and needs for each individual Head Start program and then tailoring activities to meet the specific needs will make the initiative more appealing, clarify the process, and ease any apprehensions that may exist.

Initially, the staff of an urban Illinois program were reluctant to launch a new health education program. Two coordinators complained that they barely had time to complete the newly adopted assessment tools, and couldn't do more. The teachers felt that the problems faced by the Head Start families in the inner city were so serious and overwhelming that they could not begin to prevent anything.

However, the director and a few members of the staff were persistent; for them, reducing exposure to health risks remained a priority. One major health problem for staff was back strain, since the teachers and other staff were always bending over, lifting children, moving equipment, and sitting on children's furniture. This was a problem for many family members as well. Although the staff and parents frequently complained about this problem to one another, it never came up in meetings or reports as a health priority.

The director brought the problem to the Health Services Advisory Committee. Together, they decided to secure the services of a physical therapist for ongoing staff and parent education via a "Back School," and asked the health coordinator to rewrite the safety standards to include practices to reduce back injury. Materials, posters, and resources were purchased and made available. Periodically, the staff completed health check forms where they listed their concerns (not limited to back complaints) and other needs. In addition, plans were made to create a "recognition day" for staff and family members that would include information about wellness and a ceremony to acknowledge their efforts to reduce risk and better care for themselves.

Targeting these concerns enabled the staff to see that attention to their own health could help improve their lives. After the first year of the program, they began to participate more enthusiastically in assessing and planning programs for themselves, children, and families. Some of their fears about the extra work involved did not develop. However, even when extra effort or time was required, staff realized that the benefits outweighed the cost.

The Role of Coordinators

Because health includes physical, mental, social, and environmental health issues, all coordinators have a major role in comprehensive health education in Head Start. Once the Head Start director has established a comprehensive health education program as a priority, it is important to ensure that the entire management team works together as part of the effort.

The director and management team can stress the importance of all facets of the program working together. While the health coordinator will usually play a significant role, each component coordinator needs to be viewed as a significant contributor to a comprehensive program. By its very definition, comprehensive health education programs involve *all* aspects that have an impact on the well-being of children, staff, and families. The opinions and skills that other component coordinators offer are essential. Working together during all phases of the effort will also help coordinators become invested in whatever is created. Having each coordinator write a part of the health education plan is a good way to encourage cooperation and involvement.

Pertinent health information needs to be routinely shared—by memo or during weekly intercomponent meetings—among all coordinators, not just the health coordinator. This will also help underscore the comprehensive approach to health and wellness. Discussing risks to health and well-being, and health education responses, can be a prominent part of the agenda.

Health Coordinator

The health coordinator usually possesses the skills and expertise relating to a wide range of health issues, and is also most frequently in touch with children, staff, and families about health care services. He or she will most likely be the central person to assess health needs, develop strategies to meet those needs, and help to implement comprehensive health education programs.

The health coordinator provides important feedback to the health education team on traditional and current health risks, needs, concerns, and trends within the Head Start program and community. It is helpful to emphasize the health coordinator's role as a resource person—"the team quarterback"—in assessment, planning, and implementation. Sometimes the health coordinator is more comfortable with traditional health topics than with coordinating or delivering health education programs. In that case, another coordinator may be more appropriate to take the lead in coordinating or providing health education.

Education Coordinator

The education coordinator can also be a key player, identifying children's cues about possible or potential health risks and concerns, and in designing developmentally appropriate strategies to be used in the classroom.

> In a rural Ohio program, Maria, a teacher, and Chris, the education coordinator noticed that several children in a particular classroom were frequently absent due to a variety of respiratory complaints and stomach aches. Chris mentioned this trend to the health coordinator, who contacted a doctor on the Health Services Advisory Committee. Together, they devised a system for gathering data from records, other staff, children, and family members. By looking at the data, they discovered that some of the children had previously been diagnosed as having asthma; several others were also suffering from variations of the same condition. What had been dismissed as allergies, recurrent colds, or "nerves" (the stomach aches were a symptom of chest pain not intestinal distress) was a common illness—asthma.
>
> Staff from all components then designed an educational program about asthma and reducing the risks of exposure for children, their families, and the staff. The education coordinator created developmentally appropriate activities for children on how to understand and recognize asthma in themselves or their classmates and how to reduce risks.
>
> Other component staff developed training sessions for family members and staff. As a result, the janitorial staff paid particular attention to dust accumulation in the classroom and throughout the building; parents were advised about diagnosis and medication; and teachers learned what to do in case of an acute asthma attack. In addition, the education coordinator and all of the teaching staff played a lead role in health education for parents, talking with family members on a regular basis and developing activities that bridge home and school.

Parent Involvement Coordinator

The parent involvement coordinator and his or her staff can provide appropriate ways to stimulate and maintain parent involvement through activities such as these:

- Design take-home surveys about risks, cares, or concerns related to the well-being of parents or members of their families.
- Introduce ideas about comprehensive health education in existing parent support groups.
- Work with parents to assess health risks in their families and neighborhoods, and join together to effect changes.

- Develop a wellness library of print resources, audiotapes, and videotapes.
- Provide formal or informal discussions and educational opportunities with parents.
- Ensure that all materials are available in the languages spoken by the families and, if in print, at appropriate literacy levels.

In a rural program in Alaska, Tom, the parent involvement coordinator, overheard two parents discussing their desire to quit smoking. Tom, himself a smoker, approached them and asked if they would like to join him in an attempt to quit. Together, they implemented a 12-week program for all Head Start staff and families designed to *raise awareness* about first- and secondhand smoke; *motivate* people with incentives to try new behaviors such as buying fewer cigarettes, smoking less, and substituting a new behavior; and *help people quit smoking* by offering an onsite smoking cessation program, and starting a support group for participants. The program was such a success in raising awareness and changing some participants' behavior, that Tom and the two parents have agreed to offer it again.

Social Services Coordinator

The social services coordinator and staff can help assess individual, family, program, and community needs; offer information about community health concerns, environmental or neighborhood risks; and provide a link to community groups that could enhance the delivery of comprehensive health education programs. The social services coordinator can also alert the management team of particular needs within the community that can impact health risks and care, such as inadequate health care resources and environmental hazards. In this way, he or she can play a major role in identifying the social and environmental issues that need greater advocacy efforts.

In a rural program in Virginia, the social services coordinator identified a major risk to the health of many of her families who lived in substandard one- to two-room housing units and used kerosene heaters. Together with the other Head Start managers and parents, she launched an education and advocacy effort, working with other community agencies and the Health Services Advisory Committee, to obtain smoke detectors and kerosene heater barriers from a regional community health agency for every family who needed them.

Since education about health and well-being often takes place on a more personal and informal basis, the relationship between the social services coordinator and his or her staff and individual families provides an important opportunity for meeting specific health education needs and concerns. During home visits, for example, the social services staff can help raise awareness, provide information, and reinforce skills needed to prevent or reduce the risk of substance abuse, HIV infection, domestic violence, and child abuse or neglect.

> At an urban program in eastern Massachusetts, alcohol, tobacco, and other drug use within the community were on the rise, and children were experimenting with drugs at an earlier age, usually about nine years old. The family services coordinator developed a "Prevention Home Visit" program, where alcohol and substance abuse prevention in children are discussed at home with families. This first step in a substance abuse prevention program has opened the door for people to learn more about prevention and intervention on a one-to-one basis, and has enabled many to disclose their concerns about themselves or their loved ones. The visit has also helped people in recovery to ask for assistance in accessing needed services. At the end of the visit, families are given written information on identifying alcoholism and substance abuse, as well as on where to get help and resources for staying in recovery.

Disabilities Services Coordinator

Since the disabilities services coordinator identifies, assesses, and provides services for children with disabilities and their families, she or he is an important resource for health education, particularly in organizing and developing materials for the staff and parents on understanding disabilities and chronic illnesses.

One way to strengthen intercomponent coordination as well as stress the cross-component nature of comprehensive health education is to have each of the coordinators contribute to the development of the health plan.

Head Start Health Manager

In conjunction with the education coordinator, the disabilities services coordinator can provide timely staff training on the needs of children with disabilities and their families, and health risks for children with specific disabilities. As an advocate for appropriate services, the disabilities coordinator can also provide useful information on access within the community, current medical practices, and how to design health education programs that address the needs of children with disabilities and their families.

A comprehensive approach to health education will strengthen the Head Start management team by providing another framework for ongoing communication, shared responsibility, and joint efforts. Other strategies designed to enhance the

"team" aspect of the management team, such as role-playing exercises or activities involving cooperative learning, will also enhance intercomponent coordination. For example, Head Start component coordinators in one Texas program formed a learning group to identify the risk of lead paint exposure to the families in their program and develop strategies to reduce those risks (Pike, 1993).

The Role of the Health Services Advisory Committee (HSAC)

To underscore the intercomponent nature of comprehensive health education, members of the Health Services Advisory Committee can be asked to "adopt a component." Each component might be adopted by one or two HSAC members. Their duties will include meeting and communicating with the staff and coordinator of the assigned component and learning from their perspectives about risks to the well-being of children, parents, and staff.

Health Educator for Head Start Programs

The HSAC advises in the planning, operation, and evaluation of the health component. Composed of a variety of health professionals, including representatives from major community agencies, private health professionals, and parents, the HSAC may include a physician, nurse, dentist, dental hygienist, nutritionist, and child psychologist or mental health representative. Health educators from local hospital "wellness" programs, health maintenance organizations (HMOs), or local chapters of national organizations such as the American Cancer Society are also useful in creating an HSAC that can assist in developing and providing appropriate health education programs.

The HSAC can be a vital resource for health education and promotion, alerting the management team about emerging health risks and needs, not only in Head Start, but in the community as well. It can also be a source for identifying and networking with local health educators, delivering or finding health education training, and providing strategies for launching health education initiatives.

Generally, the HSAC meets twice a year. To help make comprehensive health education a priority for Head Start programs, it may be helpful to hold an additional meeting to orient the HSAC members to the new health education initiative, or invite HSAC members to a programwide kickoff to focus on the needs assessment process and evaluation.

To further encourage active participation of the HSAC, the Head Start director and other coordinators may wish to make a brief report or send a letter at the beginning of the year, explaining the program's philosophy and approach toward health education, and how it will enhance Head Start's health activities. A sample memo (Exhibit 2) for a health education kickoff event appears on the following page.

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Exhibit 2

Sample Memo

To: Health Services Advisory Committee

From: Tony Padre, Head Start Director

Re: Focus on Health Education and Health Promotion

Date: October 1

We are very happy to inform you that we will be focusing more on health education for children, families, *and staff* this year than in previous years. To begin this effort, we will be hosting a "Wellness Night" for all staff and families, on **Tuesday, November 17, from 7:00 to 8:30**. Baby-sitting and transportation will be provided.

During the evening, we will show a 10-minute "fun" video, followed by a brief presentation on the prevention and wellness campaign we will begin this year. We will also have a short and very humorous presentation on "Well-Being in Head Start," written and performed by a few staff members and parents. Refreshments will be served (nutritious, of course!).

I hope you can join us and see some of the impact you are having! Besides, you might be inspired to make a new wellness goal for yourself.

You are important members of our team as we move to make health and well-being a main focus for us all. Again, thanks for your support and assistance.

***Healthy People 2000* offers a vision for the century, characterized by significant reductions in preventable death and disability, enhanced quality of life, and greatly reduced disparities in the health status of populations within our society.**

Department of Health and Human Services, 1990

Communication with HSAC members can be accomplished on a continuous as well as annual basis. Stress to HSAC members that their expertise uniquely qualifies them to help with the assessment process and to provide important insights about health risks and concerns, based on their observations, interactions, and medical or psychological treatment of Head Start children and their families. HSAC members can play a critical role in educating program staff about national trends in the major causes of illness, injury, and death broken down by age and ethnic group. They can target the health objectives of *Healthy People 2000*, a report that sets forth the national health promotion and disease prevention objectives for the year 2000.

Encouraging feedback and participation from HSAC members can be facilitated in other ways:

- Enlist them to review needs assessment results and help form recommendations for priorities for the year.
- Invite them to develop strategies with program staff that ensure successful program outcomes.
- Keep members informed with phone calls, memos, reports, parents' newsletters, subcommittee meetings, and invitations to other Head Start activities.
- Ask members to share and disseminate information from publications such as the *National Health Services Newsletter* and the U.S. Department of Health notices.
- Have members review and interpret health-related information reported in the national or local media (e.g., the benefits of drinking milk or the dangers of *e coli* bacteria).
- Suggest that members use professional affiliations and memberships to advocate for improved health services to the community.
- Inquire about issues the HSAC may want to address, such as risks and needs related to physical, emotional, social, and environmental concerns.
- Schedule "check-in" calls at regular intervals (e.g., monthly, every three months) by the director or other manager to discuss trends and other health-related concerns.
- Suggest that members invite other health education, public health, or adult education professionals to join or participate in the HSAC.
- Ask members to participate in the program's annual evaluation efforts and to make recommendations for program goals.

Summary

Tips for Your Health Education Team

- Identify your team.
- Look to your Head Start director for guidance, commitment, and enthusiasm.
- Encourage coordinators and other members to work together for the common goal of implementing a comprehensive health education program.
- Try strategies such as cooperative groups to enhance your team activities.
- Enlist the expertise of the Health Services Advisory Committee.
- Consider a "fun" activity to kickoff the program.
- Keep parents, staff, and community members involved!

CHAPTER 2

PLANNING HEALTH EDUCATION PROGRAMS

CHAPTER 2

PLANNING HEALTH EDUCATION PROGRAMS

Assessing Risk, Need, and Interest

Using Existing Tools to Identify Risks and Needs

Exhibit 3 (Using Existing Tools to Identify Risks and Needs)

Other Sources

Exhibit 4 (Sample Staff Survey)

Exhibit 5 (Sample Staff Survey)

Exhibit 6 (Sample Parent Survey)

The Planning Process

Summary

Exhibit 7 (Health Education Planning Tool)

Assessing Risk, Need, and Interest

To assess and evaluate health risks, the management team can use data gathered from existing assessment tools. Interpreting and analyzing the data generated will help the management team to set priorities, allocate resources, and design programs and learning opportunities that are appropriate, accessible, and popular.

Many tools already exist within Head Start, including:

- Community Needs Assessment
- Program Information Report
- Program self-assessment
- Family needs assessment
- Enrollment data, child, and family records

Other resources available (or easily created) may include:

- Health Services Advisory Committee
- State and local health departments
- Media reports
- Parent and staff surveys

The management team can review existing tools and resources to determine whether or not they contain the information needed to prepare and design comprehensive health education programs.

Some of the written tools may need to be slightly altered by adding or rephrasing questions. These may be open-ended and general (e.g., "What do you think are the biggest risks to your well-being?" "What are the issues that concern you most about your family's health and well-being?") or more specific ("Do you smoke?" "Is your neighborhood or your neighborhood playground safe for children to play in?"). Answers to questions such as "What area of personal health do you most want to focus on this year?" will give staff a sense of priorities from an individual's point of view. Managers may also consider creating new tools such as interest and need surveys for staff and family members, to provide additional data.

To help the management team coordinate the data from various existing and new sources, a simple, comprehensive form to summarize and prioritize needs is provided at the end of this section (see Exhibit 7, Health Education Planning Tool). Staff can complete the form annually, providing the information they have collected through various tools and resources. Priorities can then be set and activities developed to meet those identified needs.

Using Existing Tools to Identify Risks and Needs

Exhibit 3 describes existing tools and suggests ways they can help programs better understand local health needs and risks.

Exhibit 3

Using Existing Tools to Identify Risks and Needs

Community Needs Assessment (CNA)

Each Head Start grantee must conduct a Community Needs Assessment within its service area once every three years. Among other data, the CNA must include the collection and analysis of the following information about a grantee's service area: the demographic makeup of Head Start-eligible children and families; other child development and child care programs serving Head Start-eligible children; the estimated number of children with disabilities four years old or younger; and information regarding the education, health, nutrition, and social services needs of Head Start-eligible children and their families.

The CNA is an ideal tool with which to examine the risks to health and well-being and the health education needs of Head Start children and their families. It can help identify and establish priorities for current (e.g., an increase in community violence, more cases of tuberculosis, new cases of asthma), as well as long-standing (e.g., inadequate immunizations or health services, lead paint poisoning) health problems. It can also help establish goals for healthier lifestyles and highlight existing resources, such as community hospitals, local businesses, civic organizations, or community activists who can be contacted to help develop health education programs.

Program Information Report (PIR)

Annually and nationally, all Head Start programs respond to the PIR, a standardized reporting tool of more than 25 fields of information. It includes, for example, important data on staffing, agency organization, and characteristics of children and the services delivered to them. From the responses to a PIR, programs can assess areas that need attention and can develop plans to improve program services.

For example, programs report on the number of children who have completed a professional dental examination during a program year. If program statistics indicate fewer than 100 percent examined, the program is not meeting the *Head Start Program Performance Standards*, and the management team will need to address the problem. Possible solutions may include a programwide advocacy effort to encourage more dentists to provide services to families with low incomes, or establishing health education on dental health and accessing dental services as a priority for children, parents, and staff.

Program Self-Assessment

Each year the Head Start program must carry out a self-assessment to examine all levels of program operations to determine strengths and weaknesses in managing its grant, complying with federal requirements, and providing services to children and families. This information helps the director, other administrators, staff, and parents to focus their energies where they are most needed.

In conducting a self-assessment, risks to health and well-being will emerge as the particular needs and problems of the community and the program are identified. In addition, the self-assessment process expands and improves communication and teamwork between staff and parents, and generates opinions and suggestions from a variety of viewpoints. These benefits apply to the specific development of health education programs as well.

Family Needs Assessment (FNA)

The FNA is designed to provide information on many issues related to health and well-being, such as risks to physical and emotional well-being, and social and environmental threats. For example, the FNA might help identify risks to children such as dangerous substances or debris in the neighborhood and the playgrounds, domestic violence, and cultural views on health and using health providers.

The FNA helps staff and family members work together over time to identify strengths, needs, and goals, and to create strategies to meet those goals and obtain needed services and resources. Ideally, it is not merely a data gathering tool, but rather an ongoing process.

Enrollment Data

Health screenings, and dental and physical examinations, conducted upon enrollment, can also provide valuable information about health and well-being. For example, if the height and weight information about incoming children indicates that the majority of children are overweight, staff may develop a fitness program for children; monitor their diets more carefully; and offer programmatic seminars on fitness, nutrition, and cardiovascular health and risk.

Other Sources

In addition to using existing tools, Head Start programs can use other sources of information to assess, analyze, and set positive health goals. These sources, often more informal, can be as important as existing assessment tools. Incorporating them into the planning process may only involve noting, recognizing, or recording them, since they are often part of the conversation, interactions, and daily activities of the staff, parents, and children.

> While gathering information for their community needs assessment, staff from a Southeast program discovered that automobile crashes and injuries were on the rise in their city. Informal discussions among children, family members, and staff later revealed that many adults were not wearing seat belts and many children were either being placed in car seats inconsistently or not at all. The program embarked on a month-long "buckle up" campaign with promotional materials, speakers to raise awareness and motivate people to change their behavior, and a concerted effort on the part of everyone to remind each other to "buckle up." The program later established a lending library with approved used infant and child car seats, and sponsored a day when families and staff could bring in their cars to have their seat belts checked and repaired.

Health Services Advisory Committee

The HSAC can provide valuable and essential information about program, neighborhood, and community health risks as well as trends in national health problems and health care. As providers and educators in the community, they have firsthand knowledge about needs, as well as the expertise to help set priorities about issues of concern.

State and Local Health Departments

State and local health departments are perhaps the best source of data about health risks and trends in the community. These agencies are able to share information that will support issues found from other data sources or will highlight emerging issues.

The Media

Head Start programs frequently use national and local newspapers, newsletters, magazines, television, and radio to identify health risks and trends nationally and in their immediate area. Whether it's the importance of exercise, the effects of secondhand smoke, an increase in the rate of breast cancer in a particular community, or an upsurge in cases of tuberculosis, articles and reports about health concerns are readily available in the popular media.

The management team, Health Services Advisory Committee, staff, and parents can be encouraged to bring in relevant information and concerns. Sometimes programs get confusing or conflicting health information from the newspapers, magazines, or television. In such circumstances, it's a good idea to call the local health department or consult an expert on the HSAC and make sure the information is accurate before it is distributed.

The HSAC can also provide important assistance in assessing the accuracy of reports in the popular press. Appropriate print material can also be kept on hand for a health education resource library, bulletin board, future planning, and use in lectures, workshops, and seminars.

Staff Surveys

The observations of all staff who interact with children and their families during the normal course of the day are crucial in determining health risks and health-related interests. While riding on the bus, playing in the classroom, eating meals, or being picked up at the end of the day, the casual conversations and interactions between children and their families provide important clues about not only troubling or distressing health trends, but about their health needs and interests as well. Encourage staff to share their observations, conversations, and other interactions; this can be helpful in identifying and assessing needs. Staff surveys are also an important source for identifying health risks, interests, and needs for staff themselves.

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At the end of the day in a suburban program, the teachers and children gathered for circle time. During "sharing time," Manny stood up and announced that his uncle had died. When another child asked how, Manny said that his uncle had AIDS. This was the first time a child had spoken about AIDS in the classroom. No one asked any more questions, and the teachers felt uncomfortable and unsure of what to say.

Later, the two teachers discussed the matter with the education coordinator, who suggested inviting the parent involvement, social services, and health coordinators to join in the discussion. They also contacted the mental health specialist to observe and speak with Manny to determine if he or his family needed additional help. In turn, the coordinators brought the issue to the weekly management meeting where HIV and AIDS were identified as increasing risks in the community. At the next Policy Council meeting, which the director asked the teaching team to attend, a subcommittee was formed to plan widespread health education on the prevention of HIV, with other efforts initiated to help children, parents, and staff deal with HIV and AIDS, as well as issues related to death and dying.

Depending on the size and structure of the Head Start program, it may be necessary to provide a thoughtful, planned, and systematic way for staff to report ideas and impressions. This may require methods such as these:

- Bring up work-related health issues or topics at staff or team meetings.
- Conduct regularly scheduled forums to discuss health-related risks and concerns.
- Create a clear chain of intra- and intercomponent communication.
- Provide training so that staff are better able to react to potential health issues and concerns heard in the classroom and in discussions with families.

Sample staff surveys (Exhibits 4 and 5) follow.

Exhibit 4

Sample Staff Survey

Hill Head Start Program

As you know, the Hill Head Start is developing a new health education program —we want to help *everyone* become healthier! Please help by completing the form below. Your responses will help us create a program that best meets our needs. Feel free to come and discuss these questions and/or your responses with LaVonna Hart, the director.

1. What are the 2 biggest risks (at home or in Head Start) to the health, safety, and well-being of the children in our program?

2. What are the 2 biggest risks to the health, safety, and well-being of the families in our program?

3. Overall, what are the 2 biggest risks to the health, safety, and well-being of our staff?

4. What are the 2 biggest job-related or program-related risks to *your* health, safety, and well-being?

5. What issue(s) should we tackle first as part of a comprehensive health education program for children, families, and/or staff?

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Exhibit 5

Sample Staff Survey

Hill Head Start Program

As you know, the Hill Head Start is developing a new health education program—we want to help *everyone* become healthier! Please help by completing the form below. Your responses will help us create a program that best meets our needs. Feel free to come and discuss these questions and/or your responses with LaVonna Hart, the director.

1. What health goals do we want to set for us (staff) this year?

2. What will help us achieve these goals?

3. What barriers will we face?

4. How can we overcome them?

5. Who else can help us?

Parent education should focus on promoting health and wellness, be positive, and address the question: What is needed to improve your well-being?

Head Start Parent Involvement Coordinator

Parent Surveys

Invite parents and other family members to share their interests and concerns during home visits, casual conversations, and through parent surveys.

Parent surveys should be brief, in the appropriate language and literacy level of the families, and account for the cultural factors that influence health behaviors and choices. Similar to the staff survey, they may take the form of an open questionnaire or list several suggested topics, asking respondents to check off topics of interest. Other information can be gained by asking questions about neighborhoods, such as "Who gets hurt in the neighborhood and why?" or "Have you or a family member needed to visit the emergency room in the last six months? If yes, what was the reason for the visit?" These questions—and answers—can result in health education and promotion programs targeted at reducing exposure to immediate risks.

Staff and parents in an urban program in Baltimore realized that the children were exposed to significant risks in local parks and playgrounds from broken glass and syringes. Together they worked on a variety of measures that would alleviate this risk: cleaning up the play areas, teaching children and adults about safety and injury prevention, and advocating with local officials to keep the playgrounds safe and free of hazards.

A sample parent survey (Exhibit 6) can be found on the following page.

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Exhibit 6

Sample Parent Survey

Hill Head Start Program

Dear Parents,

We are gathering information on your interests and concerns about the health, safety, and well-being of your children, your families, and your neighborhood. Some common concerns might be:

- keeping your child safe in the neighborhood
- preventing injuries at home and in the neighborhood
- helping your child solve problems without fighting
- learning how to advocate for yourself
- getting good medical care for yourself and your children

Please help us by filling out this survey. We want to hear what you think! Feel free to also discuss any of your personal interests (weight loss group or smoke enders group, for example) and concerns with your child's teacher or LaVonna Hart, the director.

1. What would you like to improve about your *children's* health and well-being?

2. What would you like to improve about your *family's* health and well-being?

3. What would you like to change for the better about your *own* health and well-being?

4. What would you like to improve *in the neighborhood? In the program?*

The Planning Process

Assessing health risks is a first step in creating comprehensive health education programs. Data from all sources within Head Start—including the community needs assessment, family needs assessments, parent and staff surveys—will help provide a picture about issues and risks for individuals, families, neighborhoods, specific sites, the program, and the community.

Once data are collected, assemble a team to discuss the information gathered as it relates to major health issues (such as building relationships, prevention of community violence, parenting, nutrition, disease prevention, and environmental health). The team might consist of the director and coordinators; ideally it will also include parents, staff from different levels within the program, and members of the HSAC.

A sample tool to help programs discuss data and establish priorities is provided at the end of this chapter (Exhibit 7). A way to use the tool to help analyze issues and set priorities might be:

- Distribute a copy of the form to all participants before the group meets to help them think about health risks and goals for children, families, and staff in the program as well as broad issues in health education.
- Have individuals identified ahead of time to review information from one or two data sources and be prepared to summarize issues for the group. For example, the social services coordinator might share with the group the results of data gathered with the family needs assessment process and the community needs assessment, while the parent involvement coordinator reviews and summarizes data from the parent and staff surveys.
- At the beginning of the meeting, have the assigned individuals briefly summarize the major risks or needs that surfaced in the data source(s) that they reviewed.
- The team then uses the tool (or one the program develops) to guide discussion as members combine the information they have gathered about health risks first to children, then families, and then staff, and brainstorm resources or programs available to address issues.

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- The team chooses up to three broad issues (column 2) as priorities for the program year. Issues might be chosen as priorities because they are judged by the group to be pressing concerns (environmental hazards) with insufficient community resources to address them, new trends that need attention (rise in preventable diseases), or issues that involve a wide audience and are likely to generate enthusiasm for the health education program immediately (personal health and wellness).

This type of planning process will help programs identify annual priorities, evaluate past efforts, and develop short-term and long-term goals. After priorities are chosen, the team might want to present their findings to all groups—all staff, policy council members, and members of the Health Services Advisory Committee—to get feedback and create interest and enthusiasm.

Summary

Tips for Planning Health Education Programs

- Gather information you already have available, such as:
  - —Community Needs Assessment
  - —Program Information Report
  - —Program self-assessment
  - —Family needs assessment
  - —Enrollment data and child and family records
- Collect information from other sources, such as:
  - —Health Services Advisory Committee
  - —Your state or local health department
  - —Local or national media
  - —Staff or parent surveys
- Assemble a team to discuss the health information you've gathered.
- Use the Health Education Planning Tool (Exhibit 7) to help your team identify priorities and plan your next steps.

Exhibit 7

Health Education Planning Tool

Instructions to Planning Team Members

1. List the specific health-related interests and risks that you have identified under the appropriate issues in column 2.

2. Note the data source(s) that indicate these as needs in column 3.

3. Indicate the appropriate audience(s) (children, families, and/or staff) in column 4.

4. Record the resources (materials, programs, personnel) currently available to help with the effort (in the program and in the community) in column 5.

5. Record resources still needed (materials, personnel, financial) in column 6.

6. In column 1, note up to three priority issues for health education efforts for the year.

7. In column 7, record the person who will take lead responsibility for each priority area.

Priorities might include issues judged as needing immediate attention, issues identified as important by a number of data sources from within the program, or issues that staff and parents feel will help get the initiative underway. For example, personal health and wellness may not surface as a pressing need, but may be selected as a priority because of the value it has in promoting health programwide and encouraging participants to be involved.

The examples listed within each issue area are presented to give you ideas. Your program will probably have different and/or additional specific topics to address.

Exhibit 7

Health Education Planning Tool

Priorities	Issues	Data Sources	Audience	Resources Available	Resources Needed	Lead Person
	Personal Health and Well-Being exercise, fitness, wellness					
	Emotional Health feelings, self-esteem conflict resolution					
	Relationships with Family and Friends healthy families, communication, conflict resolution					
	Parenting nurturing, discipline					

Exhibit 7 continued

Priorities	Issues	Data Sources	Audience	Resources Available	Resources Needed	Lead Person
	Nutrition healthy eating, weight					
	Dental Health prevention, checkups, hygiene					
	Preventable Diseases measles, mumps, HIV, TB					
	Injury Prevention home safety, car seats, burns, falls, drowning					

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Exhibit 7 continued

Priorities	Issues	Data Sources	Audience	Resources Available	Resources Needed	Lead Person
	Violence Prevention child abuse, domestic abuse, interpersonal youth violence, community violence					
	Stress Management					
	Preventing Unplanned Pregnancy, Sexually Transmitted Diseases, HIV					
	Preventing Tobacco Use					

Exhibit 7 continued

Priorities	Issues	Data Sources	Audience	Resources Available	Resources Needed	Lead Person
	Preventing Alcohol & Other Drug Use					
	Environmental Health lead paint, pollution, toxic dumps					
	Health Services and Health Information finding appropriate providers, buying health products, getting health information					
	Other					

CHAPTER 3

DESIGNING HEALTH EDUCATION PROGRAMS

CHAPTER 3

DESIGNING HEALTH EDUCATION PROGRAMS

The Process of Change

Exhibit 8 (Stages of Change)

The Resources Available

Lessons from the Field

Health Education for Staff

Exhibit 9 (Tips for Starting a Wellness Program for Staff)

Health Education for Families

Health Education for Children

Summary

Designing Health Education Programs

Once the assessment process has been completed and priorities and resources are identified, it is time to design a health education program. What needs to be considered to ensure a more successful health education effort? First, program managers might want to assess where adults are in the process of change. Do participants know certain behaviors are unhealthy? Are they ready to take action? What type of health education program would move them to the next step? For example, a smoking cessation program would not reach people who feel their moderate smoking is not a health problem. Sometimes the program content, activities, and leader are excellent but the effort fails because of a mismatch between what is delivered and the audience's readiness to learn about the topic.

Once the audience's needs have been assessed, program managers will need to locate and assess print and audiovisual resources to support the health education and promotion effort. Are curricula or other materials readily available to help address the priorities selected? Are they appropriate for Head Start children, parents, and staff? Do they fit the adults' stage of readiness for change?

This chapter provides information to help Head Start programs think about audience needs and adapt materials to facilitate change.

The Process of Change

To successfully promote health and positive changes in health-related behaviors, interventions need to be tailored to match the participants' stage of readiness to change.

Researchers now believe that most people go through a predictable sequence of stages before they voluntarily change unwanted behavior (Prochaska, DiClemente, and Norcross, 1992). Exhibit 8 summarizes these stages.

Exhibit 8

Stages of Change

Stage 1

Precontemplation

"My smoking isn't a problem."

In this stage, people do not realize or believe that their behavior poses a problem. For example, a moderate smoker might believe that his or her smoking poses no health risk.

A "precontemplator" might benefit from a program designed to provide basic information, raise consciousness, and promote self-understanding about smoking. Such a program might move the "precontemplator" to the next stage of change.

Stage 2

Contemplation

"I'll probably quit someday."

In this stage, people recognize that a certain behavior is, in fact, causing a health problem. The "contemplator" is seriously considering changing the behavior sometime in the foreseeable future.

At this point, a program designed to raise awareness, provide opportunities for self-understanding and support, and foster insight regarding how one feels and thinks about smoking, might help move the "contemplator" to the next stage of change.

Stage 3

Preparation

"I'm going to quit after the party in two weeks."

In this stage people take small steps toward their goal, intending to change their behavior within the next month or so. The smoker might try to cut down on the number of cigarettes a day, or switch to a lighter brand. He or she might then begin learning about smoking cessation products or programs. "Preparers" begin to act—not just think and feel—taking steps to set goals, target dates, or to change their environment.

At this stage, the most useful interventions help participants set targets; assist them as they choose to act; encourage belief in their ability to change; and help them begin to evaluate and control the situations that trigger the behavior.

Stage 4

Action

"I can do it."

In this stage, the person eliminates the habit. This is usually accompanied by the substitution of a new one, removal of temptations, and turning to others for help. The smoker may choose chewing gum or exercise, throw out his or her cigarettes, and join a support group.

A person in the action stage needs to develop skills to control the forces that prompt the behavior. Beneficial programs are designed to help participants with stimulus control. The action stage is a stressful one, since the behavior has been eliminated; therefore, support and understanding from helping relationships—counseling, friends, support groups—can help people move to the next stage.

Stage 5

Maintenance

"I'm here to prevent myself from starting to smoke again."

In this final stage people use strategies to ensure continued freedom from the unwanted behavior. Although this stage receives little attention because the unwanted behavior is gone, it nonetheless is an important step in the process of change.

Participants need support to avoid "cycling back" and resuming unhealthful behavior. Maintenance programs help people identify conditions under which they might cycle back and offer them alternative forms of coping. Support groups are helpful in this stage, as is praise for continued stability.

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Health education promotes self-sufficiency and empowerment—two goals of Head Start.

Head Start Education Coordinator

An interesting aspect of this research is the finding that it takes most people about *five* tries before they are successful in eliminating the habit. In other words, relapse is the rule rather than the exception. The process of trying over and over again is part of being able to change behavior for good. In this context, the word "relapse" is not useful; it connotes failure, and may even diminish one's desire to change. More accurately, there is no "relapse." Cycling back to an earlier stage is not failure but part of the process of achieving success. This is an empowering notion for people who are struggling to change their unwanted behaviors.

This model of change is helpful for those implementing a comprehensive health education program for parents and staff. It provides the context and language for discussing change and changing unwanted behaviors in a non-blaming way; views the process as predictable and similar for the majority of adults; provides a map for acknowledging steps, however small, taken to achieve success; and empowers by viewing cycling back to earlier phases as a part of the process, rather than a failure.

Being aware of and sensitive to different levels of readiness will help Head Start programs develop activities that match the audience's needs. For example, some Head Start parents and staff might perceive domestic violence as a prevalent problem in a particular community. However, if the majority of the Head Start parents and staff are *precontemplative* (e.g., they do not believe there is a problem), they might not be interested in educational activities on "preventing domestic abuse." "Violence prevention," however, might attract a wider audience and heighten awareness of domestic abuse. Such an intervention is targeted to where people are (precontemplators) and moving them to the next stage.

The Resources Available

Head Start programs are usually rich with people resources. Staff members routinely provide health education for children, parents, and staff. And many component coordinators (as well as other staff) are experienced and accomplished at developing and adapting materials into training activities, and delivering training to parents and staff. Similarly, teachers are experienced and skilled at adapting health-related content into developmentally appropriate experiences for children in their classrooms. Through active community involvement and networking, Head Start programs can also access community experts who can provide resources or deliver training sessions.

Print and audiovisual resources for developing a comprehensive health education program pose somewhat of a challenge, however. Comprehensive health education is an evolving field and most materials currently available are on single health-related topics for children, parents, or staff. Many provide information only and do not suggest ways to build skills that lead to behavior change or advocacy to change the system. While new materials and curricula are entering the market, a comprehensive health education curriculum that builds skills and is appropriate for all three audiences—Head Start children, parents, and staff—may be difficult to find.

The *Choosing Wellness: Comprehensive Health Education Resource Guide*, a companion to this handbook, lists a limited number of curricula that address health education topics *comprehensively* for preschool-age children; but none address the health education needs for children, parents, and staff simultaneously. In developing a comprehensive health education program, integrated for all three audiences, Head Start programs may consider the following options:

- Begin with a comprehensive health education curriculum for preschoolers and supplement it with curricula and other materials on single topics to address the health needs of parents and staff. In choosing this option, programs need not limit themselves to one comprehensive child curriculum, but rather may choose to combine parts of two or more comprehensive child curricula to address the health topics affecting their children and families.
- Use the many curricula available for children, parents, or staff on single health-related topics (nutrition, mental health, violence prevention, etc.) to piece together a more comprehensive curriculum for all three audiences based on the program's health needs.
- Use a combination of existing curricula and other health-related print and audiovisual materials to develop a new comprehensive health education curriculum for children, parents, and staff.

The companion resource guide lists more than 250 health-related curricula, print, and audiovisual materials, and resource organizations that can offer assistance in adapting and developing health education curricula for children, parents, and staff. The guide also provides tools for assessing existing health education curricula to ensure that they are appropriate for and meet the needs of individual Head Start programs.

By building a framework for health education, based on the importance of prevention and building skills to lead healthier lives, any content will be more easily adapted and incorporated into the health education program. Beyond the program content, individual Head Start programs will need to decide which skills they want to introduce and reinforce. What are the skills needed to address the underlying issues in your community? Advocacy? Decision-making? Assertiveness? Refusal skills?

Given the limited time and resources available for most Head Start staff, and the multiple risks, needs, and interests of families living in poverty, narrowing the program focus is an initial key to success. Taking one step toward prevention—guided by a vision of where the program wants to go—is critical to success. Health education efforts frequently start small, gain momentum, and then address a more comprehensive set of issues once participants are involved and committed, and the program is in place.

Lessons from the Field

As Head Start programs begin to design health education activities for staff, parents, and children, they will not only select priority issues and skills to focus on, but will also select from a range of strategies (e.g., home visits, mentoring, workshops) available for the delivery of health education. Health education activities—steps toward comprehensive health education for staff, families, and children—from across the country are described below.

Health Education for Staff

We set an example for children and parents. That doesn't mean we have to be perfect, but we should be aware of our own behaviors and try to take care of ourselves.

Head Start Teacher

Moving toward health, safety, and wellness is important for all of us. While the *Head Start Program Performance Standards* mandate health education for children and parents, an awareness is growing that health education is critical for staff, as well.

Staff reap the benefits of learning about their own health and ways to improve their health-related behaviors. Many staff will become healthier and have a greater sense of well-being. Staff also serve as role models for parents, demonstrating the importance of caring for oneself. As one health coordinator remarked, "Parents learn as much from what we do as what we say." In addition, the bonds between parents and staff can be strengthened as together they struggle with many of the

same health-related issues and challenges. As one director commented, "In the area of adopting healthy behaviors and changing unhealthy ones, we know we're all the same here." Finally, health habits of parents and staff play an important role in the development and reinforcement of children's health skills.

Staff are often at different stages in perceiving their own needs or interests. For example, some staff devalue their own needs because they are so busy taking care of the needs of others. Head Start programs need to offer health education and prevention activities for staff that not only help them do a better job, but improve their general understanding and maintenance of their own good health as well.

By developing these programs, Head Start sends a powerful message to staff—that they are valued not only for what they do but for who they are.

Health education for staff goes well when the leadership truly cares about staff health and well-being, values health education for all staff members, and encourages participation in the programs offered. This includes emotional support as well as logistical support, such as activities offered during work hours.

Head Start Health Coordinator

Industry has made great strides in fine tuning worksite health education, health promotion, and safety for employees. Head Start programs can learn from such efforts by incorporating relevant aspects of "best practice" (Mason, 1993) in worksite health education and promotion into their health education efforts with staff, by ensuring:

- demonstrated management commitment
- strong program leadership
- a system for assessing employee health
- comprehensive programming with the ability to reach out to nonparticipants and high-risk employees
- opportunities for physical exercise
- a strong health partnership (via the benefits department or health provider)
- environmental support programs (marked walking paths, healthy foods available, policies for a smoke-free environment)
- tracking and evaluation

Health education for staff is important because staff are important . . . as human beings.

Head Start Director

Several Head Start programs throughout the country have discovered many of these principles as they developed wellness programs for staff initially, and then for parents as well.

> A Head Start program in Michigan implemented a voluntary staff wellness program accompanied by a child health program. It developed slowly, over a period of years. A key feature is an incentive program, where staff accumulate points, based on the honor system, for involving themselves in health-promoting activities. These include participating in a confidential, computerized health assessment and screening; attending health-related lunchtime presentations featuring outside speakers; engaging in physical activities such as walking or strenuous housework; and taking advantage of preventative measures such as having a mammogram.
>
> A day is set aside at the end of the year when all participants receive pins and vouchers for a physical (all staff are required to have physicals at their own expense every other year), gift certificates for department stores, or dinner. All staff are invited to the day-long event. The program has been so successful, it is now designed to reach parents and other family members as well.

This program's Health Services Manager suggests the tips in Exhibit 9 (Hosner, 1991) for starting a wellness program in Head Start.

Exhibit 9

Tips for Starting a Wellness Program for Staff

- Survey staff to assess what they want and need.
- Involve everyone by offering individualized health assessments.
- Institute a wellness committee, comprised of staff from *all* levels to decide on: ways to promote staff health and wellness, specific activities that can earn points, allocation of points, incentives, and problems as they arise. This allows for leadership and "ownership" of the program by participants.
- Network with wellness associations and organizations (e.g., local hospitals with staff wellness programs, local companies with worksite health initiatives) to learn about other programs.
- Investigate sources for funding a wellness program.
- Use marketing and incentives, "gimmicks" to promote the program, keep the ideas alive, and keep it fresh (e.g., an apple on the chair of each staff member along with a copy of the health newsletter).

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Each Head Start program is unique, however, and programs will want to develop a health education effort for staff that meets specific needs, addresses specific risks, and responds to the staff and "culture" of the particular program. What is important is to *get started*. Programs throughout the country have reported that having a vision and then taking the first step gets the momentum going, and gets other activities on their way.

In addition to wellness programs, the following examples demonstrate some of the ways Head Start centers have used needs assessments to help create programs that enable staff to adopt lifelong health promoting habits. These examples illustrate the variety of strategies Head Starts can use to deliver health education for their staffs.

> The staff of an urban center in New Jersey participate in a program designed to promote good health. Annual physicals for each staff member are required. At the annual health fair, a variety of screenings for diseases is provided, as well as a free half-hour massage. All staff members also have free access to mammograms, along with lectures on prevention.

> A suburban Head Start program in California is addressing staff stress. The center provides three to six free counseling sessions for staff if needed. Staff can also take some of their sick days as "mental health or personal" days.

> At a Michigan program, staff members keep "wellness calendars" on an honor system. Each month staff earn incentive points for a half-hour or an hour of different activities, from walking to rowing to extensive house cleaning. They also earn points for getting a mammogram, or attending a stress management class. Accumulated points can earn them a family portrait at Sears, early leave time, a makeover at a department store, or a subscription to a health magazine, among other rewards.

Designing programs to reach specific staff needs, readiness, and interests is essential. Varying health education activities in format and style will help reach different people and keep the program interesting. Ensuring cultural appropriateness is also essential. These are critical aspects of delivering developmentally appropriate programs for adults.

Three types of activities are essential to the success of health education and promotion programs for staff: awareness raising, motivation, and behavior change.

Awareness Raising

- Provide health-promoting materials, images, and messages throughout the program over and over, and through many channels.
- Sponsor talks and panel discussions by local health providers, health educators, or specialists in worksite health programs.
- Circulate health-related materials such as books, articles, brochures, pamphlets, flyers, and videos.
- Plan holiday celebrations, potluck meals, and other get-togethers that emphasize healthy nutrition and foods. Distribute brochures, recipes, and other handouts on vitamins, balanced meals, etc., to take home.

Motivation

- Ask individuals to take a step and modify their behavior.
- Provide incentives for "trying out" the behavior change.
- Give participants ongoing feedback, acknowledging the steps they have taken and encouraging continued effort.
- Celebrate achievement—regardless of how minor the successes may appear to others, they are usually major successes for the person who is changing.
- Sponsor pre- and post-health screenings or individualized health assessment tools so participants receive feedback about changes they've made.

Behavior Change

- Sponsor workshops and other educational opportunities featuring hands-on activities.
- Offer participatory ongoing classes, such as weight reduction, smoking cessation, cooking, communication, nutrition, stress management, building healthy relationships.
- Initiate support groups (to help maintain the changes that have been made—weight loss, exercise, smoking, etc.).
- Provide one-on-one interactions, such as peer support, mentoring, counseling sessions, nutritional consultation.
- Provide emotional support and create a safe environment for participants to share their experiences and take risks.

Health Education for Families

Programs throughout the country report that staff interest and enthusiasm are essential to involve parents and other family members in health education. Being aware of the linguistic, literacy, and cultural needs of the Head Start families is also crucial in creating relevant programs. If, for example, brochures on a particular topic are only available in English, ask a parent, staff member, or member of the HSAC to help locate someone to translate the information and adapt the material to be culturally appropriate.

People need to realize that they can be perfectly healthy and still be at risk. We have to look at the things we are doing in our lives, the choices we make, our peers and what they are doing. We need to look at our lifestyles and learn what to do to stay well.

Head Start
Family Services Coordinator

Many programs use the same strategies for encouraging parent participation and enthusiasm as they do to invite staff participation. (The methods described for staff, above, may also be used for parents.) In fact, many Head Start programs design health education activities for staff and family members together. Health fairs and wellness days are ideal ways to introduce parents to a variety of health education topics, and to raise awareness about prevention, risks, and resources. Feedback gathered from such health events can be used to develop specific programs.

Other methods that have been used for families are described below.

Awareness Raising

- Distribute a parent newsletter that includes information on health issues for adults and children, and focuses on prevention.
- Provide a health and wellness bulletin board in the parent room, with clippings from local and national media on health-related issues, local risks, and new resources.
- Sponsor lectures by local health providers to increase understanding of health-related topics.

Motivation

- Provide activities tied to classroom curriculum for children, such as sending toothbrushes home for the entire family after teaching dental hygiene, or sending nutritious recipes home that children and parents can cook together.
- Sponsor field trips to supermarkets with lessons on smart shopping; local branches of national health organizations (e.g., the Multiple Sclerosis Society); and health care providers (doctors, dentists, emergency rooms). Provide incentives for participation or engaging in follow-up activities.

- Design programs where parents train parents to provide health education within the community.
- Encourage parents to set a target—a first step—and then support their efforts to reach it.

Behavior Change

- Initiate a mentoring program (parents provide support and information to one another using a buddy system).
- Create a space that is safe and supportive and where confidentiality is ensured.

Programs throughout the country have developed health education activities for parents to address very specific risks and needs in their communities, such as asthma, baby bottle tooth decay, tuberculosis, domestic violence, firearm safety, and AIDS. This ensures relevant content; appropriateness in terms of language, culture, and readiness to change; and sensitivity to the experiences of particular families.

For many parents, health education on more sensitive topics is more appropriately done individually once the parent has developed a trusting relationship with a staff member.

Head Start Social Services Coordinator

The examples below illustrate some of the many ways Head Start programs are providing health education for parents.

> At an urban center in Alabama, parents are offered a series of health education classes on a variety of topics such as consumerism (when to see a doctor, how and when to ask a pharmacist questions), injury prevention, and parenting. "I try to make the sessions practical and hands-on," the health educator explains. "In one session I handed out M&Ms, peanut butter, and other foods and asked parents to decide which foods might cause children to choke. Then we talked about what foods are safe for infants, toddlers, and preschoolers to eat and why."

> At an urban program in Baltimore, male staff members realized that men were not being reached by the Head Start program and had no place to discuss important issues—including parenting. They started a men's group for staff, parents, and other family members, open to all males important in children's lives—fathers, brothers, friends, uncles, grandfathers. While the focus is on learning how to take care of themselves and their children responsibly, the men address topics important to them, including risks to health, lifestyle issues, HIV, self-esteem, taking back their communities, and building healthy relationships.

A program in Texas sponsors sessions on nutrition where parents and children cook and eat together. The parents are invited to the classroom in the morning, where they prepare a snack or lunchtime meal with their children, under the guidance of the teachers and the nutritionist. Then recipes are provided to take home.

Staff from a Native American Head Start Program noticed a cultural stigma attached to reporting domestic violence or discussing other family problems. The program brought in a Native American mental health consultant who organized a parent group that meets onsite two times a week to discuss a variety of issues including cultural and family norms around violence and seeking help.

A suburban California program realized the need for building support networks for parents. Currently, they are successfully running groups for women, men, foster grandparents, and parents of children with disabilities. These groups are designed to heighten awareness about common issues that affect well-being, provide emotional support to group members, and offer practical assistance in increasing knowledge and skills needed to enhance wellness in themselves and their families.

If our children are healthy, then they have a myriad of opportunities open to them. If we have healthy children, there's nothing they can't do. Health is such a basic, integral part of everything we do with young children. . . . It's not something extra. It's just an awareness, emphasis, and willingness to access resources to ensure that kids have a positive attitude about themselves and their bodies, as well as good habits that they will have for a lifetime.

Head Start Teacher and Special Services Liaison

Health Education for Children

As with other curricula developed for use in the Head Start classroom, comprehensive health education for children must provide health-related information and skills in a developmentally appropriate way. This includes, among other things:

- using experiences related to a child's everyday life
- providing opportunities for hands-on, child-initiated activities
- ensuring that the language and format are appropriate and individualized for each child's interests and skills

An important aspect of providing comprehensive health education to children is training staff and parents to be alert to "golden opportunities"—circumstances that provide ideal moments to teach children about good health habits. These occur during the normal day's activities, as children interact with each other and their world. Throughout the day and in many ways, children can learn about caring for themselves and others (hygiene, nutrition, self-esteem, safety) and getting along with others (accepting differences, respect, conflict resolution).

Making exercise fun has been one of the ways a Head Start program in the Northwest has offered health education in the classroom. After a long bus ride the children come in and do a few minutes of teacher-led activities that include bending, stretching, and jumping, and most of all, having fun.

At a program in northern Maine, the local dental hygienist donated a portable chair, which is taken to all the centers to help children experience what it's like to sit in a dentist's chair and thus help alleviate related fears.

In a Michigan program, there is a formal health education campaign called, "Get a Health Start with Head Start" and the "spokesbear" is Scrubby Bear. He is used to teach children about a variety of health-related issues. The Scrubby Bear campaign is used throughout the program, with families and staff as well, to make health education interactive, fun, and integrated.

A teacher in a rural program in Idaho adapted an activity she had observed in a kindergarten to help children understand the concept of germs and the importance of washing their hands. "I took orange tempera paint (powdered) and put it on a toy. After playing with the toy for a little while I made myself a peanut butter sandwich, then rubbed my eye, touched somebody else's hand, and pretty soon there was orange paint all over everything." This helped convey the concept of germs and why cleanliness will help to prevent the spread of germs that cause colds and other illnesses. Instead of tempera paint, the teacher suggests flour, cornstarch, or baby powder. "Perhaps these are not as dramatic as paint, but they are much easier to clean up!"

A teacher in a New England program describes the approach she and many other early childhood educators take as an early step in violence prevention. In her program, staff use a variety of strategies to reduce conflicts. They organize the classroom to reduce stimulation and minimize aggressive behavior. They try to have multiple sets of the more popular manipulatives available to reduce conflict. And they teach children the skills they need to resolve conflicts themselves. This includes helping children be aware of their own feelings when they are hurt as well as when they "use their hands" against others; and reinforcing the idea that they must try to use their words, not their hands to settle differences. Staff give many children the words to express how they feel. Acknowledging feelings, reducing aggressive behavior, and teaching and reinforcing appropriate behaviors are seen as the building blocks for violence prevention skills needed later in life.

Summary

Tips for Designing Health Education Programs

- Match your program to the participants' level of readiness.
- Use your available "people" resources.
- Combine written curricula and resources as needed to develop a comprehensive program that meets your program's needs.
- Start small and build on your successes.
- Develop a program for staff health, safety, and wellness.
- Provide culturally appropriate health education programs for families that raise awareness, provide motivation, and encourage behavior change.
- Identify ways for the health education program to promote healthy behaviors by taking advantage of "golden opportunities" with children, parents, and staff.

CHAPTER 4

MAKING IT WORK

CHAPTER 4

MAKING IT WORK

Focusing on Logistics

Reaching Participants

Keeping the Momentum Going

Evaluating Comprehensive Health Education Programs

Summary

You can have all the best information in the world, but if you don't know how to deliver it or get people to access it, it won't matter.

Head Start Parent Involvement Coordinator

What else makes a health education program work? In part, the success depends on marketing strategies that attract participants, create good publicity, and keep interest and visibility high. The more ways health promoting messages and images are infused throughout the Head Start program, the more effective health education programs and activities will be. Health content, skill building, and health promotion images and messages must be built into all that goes on.

Focusing on Logistics

Paying attention to logistical details of group sessions can sometimes make a huge difference between a well-attended or poorly attended program. Providing child care and transportation, scheduling the program at a convenient time, giving advance notice and reminders, finding a comfortable setting, and offering refreshments are incentives for families and staff. It is important to have handouts to remind participants of key points, making sure printed materials are at the appropriate literacy level (fifth grade is suggested) and in the language of the participants. To ensure success, make sure that group activities are fun and supportive, and that the presenter hired is engaging, enthusiastic, and respectful of the audience.

Reaching Participants

Several strategies for reaching participants and encouraging their involvement are listed below.

- Use incentives. These range from offering door prizes (e.g., a shopping spree at the program's "second-hand" shop, toiletries, or detergent) to having parents and/or staff accumulate training points that lead up to a prize or an award. Local businesses may be willing to donate merchandise, gift certificates, or services.
- Include hands-on activities. Typically this might be something creative—jewelry, a craft, or cooking project. Take-home items—brochures, recipes, tips, a completed project—appeal to participants and help them remember the information presented.
- Feature children in the session. Parents and staff love to participate in activities where children are part of the program! Parents will often come to see their children perform. Children can also convey information to their families and staff about reducing or preventing health risks. For example, if children are taught to always "buckle up" and encouraged to ask other family members to also use safety belts, the entire family will gain safety information.

- Create a health library. Collect easy-to-use books, magazines, articles, brochures, audiotapes, and videotapes on a range of health-related topics. Make sure parents and staff know about the library, and put it where it's easily and often noticed. Keep information current and up-to-date, and make it easy for people to borrow and return materials.
- Start a wellness program. Once staff and parents experience and are enthusiastic about the benefits, they can more easily sell health promotion programs to others in Head Start and in the community.

Keeping the Momentum Going

We have good programs and activities but we don't present them in a way parents want. We need marketing skills. We need pizzazz.

Head Start Health Coordinator

Marketing is perhaps as important as content, focus, and attracting participants. Marketing keeps the momentum going, keeps the message of prevention, health, and well-being "alive."

Ways to keep the prevention and wellness message "alive" and in the forefront include these activities.

- Create an image or a logo. People will begin to identify it with health-related topics and information. Have the logo, ideas, and messages repeated throughout the program in a variety of ways.
- Focus on wellness and prevention. Repeat the message that we all can do something to improve our health and the health and well-being of others.
- Tie in health education topics to other activities that are offered on the local, state, or national level, such as the American Cancer Society's "Great American Smokeout" or a "Take Back the Night" candlelight march, which raises awareness about violence against women. This can bring support from other organizations, access to materials and speakers, and media coverage. Such tie-ins reinforce the messages the audience is already hearing in the media and the community.
- Encourage staff to be enthusiastic about the programs. "For parents, staff enthusiasm and attendance can be a key element," a Head Start director commented. "By letting parents know 'I'm going to be there,' you are signaling that you think the program is worth your time and effort."
- Create a year-long calendar and display it publicly. Highlight the prevention topic to be focused on for each month, tying them into local or national campaigns.
- Recruit "morale officers" (parents and staff) interested in health education. They can think about ways to keep the message alive—using gimmicks and special efforts, not necessarily costly—to keep the message in the forefront. Some Head Start programs have distributed apples, health notes or reminders, check stuffers, newsletters, balloons, saturated fat counters, etc., periodically and without warning to keep people thinking about prevention and involved in health education.

Evaluating Comprehensive Health Education Programs

It's essential to evaluate and document the effectiveness of programs or materials offered. By evaluating the health education activities, informally and formally, programs will understand better what works and what doesn't work; what needs and interests are and aren't being addressed; and which areas are strong and which need improvement. By having an evaluation system in place, programs can refine and strengthen their efforts in health education in a way that makes the most sense for the program.

Head Start programs can use a variety of methods for evaluating the effectiveness of their efforts:

- Collect satisfaction surveys from all participants or recipients. Such surveys provide comments on the topics, presenters, and format. Surveys may be taken through simple questionnaires, informal interviews, and phone calls.
- Use local or regional resources, such as students from community colleges or universities, to help design and carry out an evaluation of the health education program.
- Conduct pre-post annual health assessments or health-risk appraisals.
- Use quantifiable objectives in program planning.
- Report back to the target audience on accomplishments.
- Have the Health Services Advisory Committee review program accomplishments on a regular basis.

After collecting the comments, reexamine the content, approach, and format of the activity or the entire program. Staff may also need to reconsider the methods used in collecting the data and revise them accordingly. Don't get discouraged! Even if the initial program isn't a roaring success, be patient. It may take time for the philosophy or approach of comprehensive health education to catch on.

Evaluation is an ongoing process. As new topics and issues arise, new families join, or other changes affect the children and families, be aware of possible changes needed in the content, format, or delivery of health education and promotion. Make sure that existing programs are constantly reevaluated and improved.

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Summary

Tips for Making It Work

- Pay attention to the details that make programs accessible, comfortable, interesting, and fun.
- Use a variety of strategies to encourage participation.
- Jazz up your marketing efforts.
- Develop a plan for evaluating your comprehensive health education programs.
- Evaluate and refine health education activities or the health education program on an ongoing basis.

CONCLUSION

CONCLUSION

Conclusion

I want to change the way we think about health—by putting prevention first. I want to change the behaviors and attitudes of Americans by promoting programs and policies which will enable us to be responsible for our own health. I want to be the voice and the vision for the poor and the powerless. I want to change concern about social problems that affect health into commitment.

Dr. Joycelyn Elders, former United States Surgeon General

Dr. Elders's words echo the vision of health education held by many Head Start programs. By building on program accomplishments—expanding health education to become comprehensive, prevention focused, and integrated—Head Start will continue its mission as a leader in improving the lives of children, families, and staff. The guiding principles of a comprehensive health education approach are:

- integration of comprehensive health and wellness into the program's philosophy
- promotion of prevention and health education activities for children, families, and staff in the program
- support and commitment to a comprehensive health education approach from the program's leadership
- commitment to building skills needed to change personal health behaviors as well as the social and environmental forces that negatively affect health
- care to tailor program content and format to meet the documented needs of staff, children, and families
- provision of continuous evaluation and modification to meet the needs and interests of the local program

Using these guidelines will help make comprehensive health education and promotion not merely an "add-on" but an integral and powerful part of Head Start. By improving the health of children, children will be ready and able to learn. By increasing health awareness among those who care for children—staff and families—well-being is enhanced for all.

Health education can enhance each individual's knowledge, attitudes, and behavior to make health-promoting decisions and to tackle health risks and problems. Most important, it improves the quality of lives and reduces suffering, thus ensuring the ultimate success of children, families, and staff to be ready to learn, to realize their full potential, and to achieve all they can in our increasingly complex and challenging world.

ADDENDUM

ADDENDUM

Relating Health Education Activities to the Head Start Program Performance Standards

Comprehensive Health Education

- Education
- Disabilities Services
- Health
- Nutrition
- Social Services
- Parent Involvement

Relating Health Education Activities to the Head Start Program Performance Standards

The following pages offer some practical suggestions for integrating health education activities into each of the Head Start components. Following the organization of the *Head Start Program Performance Standards*, each section contains tips for implementation and documentation.

Management teams can use this material in a number of ways to make their jobs easier:

- to develop component plans
- to illustrate the cross-component nature of health education
- to assist in the annual self-assessment process
- to help develop programwide training plans

This section is designed to reflect the changes in the state of the art of health education as well as the changes in the stressors that Head Start children, families, and staff face since the Performance Standards were first published.

Comprehensive Health Education

Education

Education Services Objectives

Important goals of the education component include enhancing the role of the parent as the child's primary educator, reinforcing the concept that learning is an ongoing process, and creating a bridge of activities between the home environment and the program.

Today's best practice in health education and health promotion will meet with optimum success when it is offered to parents, staff, and children and is designed to meet the needs and interests of all three audiences.

A comprehensive health education program for children is based on developmentally appropriate practice. It is responsive to children's needs and interests; provides opportunities for children to choose activities in which they actively explore concrete materials; and provides opportunities for success, aimed at making children feel good about themselves and developing positive attitudes toward learning. A health curriculum's primary focus is to help young children develop skills they will need to live healthy, productive lives and avoid unhealthy behaviors.

Appropriate content areas for health education activities for children might include, but not be limited to, information regarding expression of feelings and the development of self-esteem, visits to the doctor or dentist, personal health and hygiene, and skill building in such areas as decision-making and conflict resolution. Health education for children reflects best practice if it increases knowledge, heightens awareness, and leads to skill development that enables children to adopt and maintain healthy behaviors.

Providing health education to parents can occur in many ways. Home visits provide an ideal setting to share what children are learning and to strategize how parents can support the learning at home. Such visits can also be a way to provide health education on the personal health and well-being of parents themselves. Home visits are an ideal time for discussing health risks and needs, and strategies for prevention.

Formal and informal training sessions can be organized to support, strengthen, and reinforce parenting skills, as well as the skills needed to lead healthier lives. Information can be shared in newsletters, memos, and bulletin boards; can be written to meet the literacy, cultural, and linguistic needs of families and staff; and can respond to their readiness to accept health prevention strategies. All staff can reinforce family strengths and sound wellness practices that are already occurring in the home.

It is advantageous for staff to be a part of a comprehensive health education program as well. Training might include the basics for providing a safe and healthy environment in Head Start as well as issues around personal health and healthy decision-making for staff.

Comprehensive health education for staff and parents might address topics such as personal health and wellness, emotional health, managing stress, substance abuse prevention, HIV infection prevention, violence prevention, relationship building, conflict resolution, environmental health, and consumer health.

Education Services Plan Content: Operations

In preparing the education plan, Head Start programs can solicit input from various health experts. The plan requires close collaboration between all Head Start components and should be reviewed by the program's Health Services Advisory Committee.

In considering how to meet the standards, the education plan could include the following elements:

- how the curriculum will assist children in developing lifelong patterns of healthy behaviors and attitudes including the development of self-esteem and skill building in areas such as decision-making, social interaction, and problem solving
- the role of all components in reviewing and developing the education plan
- the role of community health experts in areas involving physical, mental, emotional, social, and cultural factors

Health education activities can be woven into all learning centers in the classroom environment and all aspects of the daily routine. For example, multicultural props, books, dolls, and signs will encourage self-acceptance, self-esteem, and acceptance of differences; props from health clinics, hospitals, or doctors' offices can be included in the dramatic play area; and children's books that deal with such topics as feelings, conflicts, illness, the birth of a new sibling, or the absence of a parent, can be included in the library area. The program's schedule should reflect opportunities for children to make decisions, express their feelings, and settle differences.

The program's daily menu for children and families, as well as food served during trainings and meetings, can reflect best practices in nutrition while including foods that are part of families' cultures. Regular tooth brushing must be an essential part of the daily routine.

Gross motor activities can be incorporated into the daily schedule and staff might want to explore such techniques as relaxation and deep breathing to reduce stress levels, encourage skill development, and promote sound physical and mental health in children. Parents and staff should think of activities to encourage outdoor play at home as well as at the program.

Education Services Plan Content: Facilities

Best practices suggest that facilities reflect an understanding of a safe and healthy environment and meet the needs of children and adults with disabilities. Centers, including classrooms and meeting space as well as space used for home-based group socialization activities, should meet the safety and health needs of the children and adults. If the state or local jurisdiction requires licensing of center-based or socialization space, programs must comply. Where no licensing is required, the grantee can request assistance from local fire and health departments to determine safety standards. Both staff and parents might receive information and assistance that will enable them to keep play areas (both inside and outside, at home and at the program) free of all hazards. Other areas that staff and parents can tackle on a local level might include creating "smoke-free" zones, improving the quality of drinking water, and addressing safety and accessibility issues in parking lots and playgrounds.

Purpose and Scope of Disabilities Service Plan

1 The Head Start grantee and delegate agency must use the disabilities service plan as a working document which guides all aspects of the agency's effort to serve children with disabilities. This plan must take into account the needs of the children for small group activities, for modifications of large group activities and for any individual special help.

Staff need to make every effort to address and integrate within their daily curriculum an appreciation of differences. Both children and adults may need information to help them understand disabilities in the hopes of improving attitudes and increasing their knowledge base about disabilities.

In addition, education staff may want to work closely with the program's disabilities services coordinator and Health Services Advisory Committee to alter their individual classroom's daily schedule to accommodate all children, including children with disabilities, in the least restrictive manner. This may entail altering and/or eliminating large-group activities in favor of working with smaller groups to maximize success and support growth and learning.

❷ **The disability service plan must contain:**

- **assurances of accessibility of facilities**
- **plans to provide appropriate special furniture, equipment and materials if needed**

Programs can look at their facilities and renovate overall space and/or classroom and bathroom space to ensure safety and accessibility for children with disabilities. This might include the need to alter classroom space to cut down on distractibility or to ensure that floor surfaces facilitate safe mobility.

Health

Health Services General Objectives

All members of the Head Start community including children, parents, and staff can have the opportunity to participate in health education activities. The linkage between the program and the home needs to be strong and consistently reinforced. Parents should have all of the positive steps they already take to promote health and well-being for themselves and their children reinforced.

In areas where health services are scarce, programs need to work with existing providers to advocate for their families and children. Health education for parents can provide information on finding and using existing medical services as well as appropriate and effective advocacy methods to increase or alter systems that are not responsive to their health needs. One goal of health education is to link families to the health care system so that they can continue to receive comprehensive health care after leaving the program.

Health Services Advisory Committee

Broad-based representation on the Health Services Advisory Committee can strive to be inclusive and reflect the diversity of the community. Programs may want to analyze their needs during their annual self-evaluation and determine if their community wellness needs are being met by current representation of the committee. Head Start programs will want to make every effort to recruit members from the fields of health education and adult education to serve as members of the HSAC.

In addition, communities might consider local health problems when recruiting membership for their HSACs. For example, if a program is located within an area with a high incidence of HIV infection, the program might invite staff from the clinics or hospitals where their families seek and receive treatment, to be members of the HSAC.

The roles of the HSAC might include assisting with health education efforts by identifying community and program needs for health education; targeting interventions; locating or supplying resources or trainers for health education efforts; and volunteering to provide training in areas in which they have expertise.

Medical and Dental History, Screening, and Examinations

The accumulated collection of medical and dental information affords children, parents, and staff significant opportunities to actively participate in identifying specific health needs of children, offering learning opportunities on relevant topics to access preventative services, obtaining necessary immunizations, providing for early interventions, and encouraging the adoption and maintenance of healthy behaviors.

A whole spectrum of health education activities can be provided for parents to promote a better understanding of medical and dental screenings, with a focus on establishing relationships with community providers that can promote health for the whole family on an ongoing basis. Information might also be shared on the developmental stages of children, community and environmental hazards to health, and establishing and maintaining health records. Effective training will be skill focused and provide hands-on experiences for parents.

A key element of health training for staff is to maintain systems of recording, documenting, understanding, and evaluating health records to best determine program direction and identify broad areas of need for program planning. Staff and parents may want to focus their energies in advocacy efforts to gain access to health services within their communities, to foster an understanding of the parent's role as the primary catalyst for meeting children's health needs, and to assist parents in their negotiation through existing health systems.

Medical and Dental Treatment

Health education for children, parents, and staff can occur before, during, and after children receive health services. For example, a program might develop a dental week with planned activities for children, parents, siblings, and staff, and schedule the events before a local dentist performs examinations on the enrolled children.

Parents can also benefit from information on how to be more effective consumers of medical and dental treatment. By including and assisting parents in the process of obtaining services, programs provide parents a learning opportunity to assess and access services, lay the groundwork for community advocacy, and develop skills needed to obtain adequate health services for themselves and their children.

Health Education

Programs will want to design a health education and promotion program that covers a wide range of issues to meet the emerging needs of children, parents, and staff. Health and wellness education can be comprehensively presented for children with materials that are well integrated into the daily schedule and are presented at an appropriate developmental level. (See guidance for the Education Performance Standards for a more thorough discussion of health education for children.)

Head Start staff and parents may need support and training in the implication of health findings for individual children and/or families and for program policies. The Health Services Advisory Committee can be used for guidance and training in these areas.

There are a variety of vehicles for providing parents information related to health issues and resources. For example, staff might use an outbreak of chicken pox in the classroom to informally talk about infectious diseases. Social services staff can assist parents in understanding their primary role in obtaining needed health care for the family, assist parents in locating health care providers, and support the parent's role by accompanying children to health care provider appointments.

To be comprehensive and effective, health education programs need to be inclusive and involve the entire Head Start community of families, staff, and children. Best practices in health education for parents dictate that materials be tailored to meet parents' backgrounds, developmental levels, personal needs, interests, and readiness to change. Topics for parent and staff health training can include prenatal

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and postnatal health, personal health, parenting, injury prevention, fitness, managing stress, preventing community violence, building self-esteem, developing healthy relationships, dealing with transitions, and substance abuse prevention. The health education program should also include community health problems such as HIV transmission and strategies for supporting people with HIV infection; environmental health risks such as lead and air quality; neighborhood violence; lack of access to health services; and any other relevant health problem that is prevalent in local communities.

The approach to health education for staff can support their roles as professionals in a comprehensive preschool program as well as promote their own health and wellness. Staff serve as role models and need to be supported in their health needs. Because Head Start is a community-based program, staff composition generally reflects the communities in which they serve. Consequently, staff often confront issues similar to that of parents and need support and assistance in such areas as managing stress, learning how to care for themselves, coping with street and family violence, and preventing substance abuse.

Disabilities/Health Services Coordination

1 The grantee must ensure that the disabilities coordinator and the health coordinator work closely together in the assessment process and follow up to assure that the special needs of each child with disabilities are met.

Intercomponent coordination systems need to be in place and functioning to serve children with disabilities effectively. The health and disabilities services coordinators will need to communicate regularly concerning children with health impairments. For example, children with recurrent middle ear infections will need to have regular retests to ensure that they receive required medical treatment to prevent potential speech and language delays.

Mental Health Objectives

Programs provide learning opportunities for children, parents, and staff to promote mental health. Local programs can assess those mental health issues that affect the families and children they serve and make every effort to include and integrate education and training on these topics. Staff may need to receive training on the importance of mental health and its effect on overall wellness.

Programs will want to set a tone that promotes sound mental health practices. Effective mental health activities support family strengths, promote wellness, and encourage prevention strategies.

Mental Health Services

The mental health professional is a valuable resource for educating children, parents and staff about ways to strengthen their health and well-being.

Mental health education activities might include:

- both preservice and inservice training for staff and parents
- regular consultation with teaching teams and/or home visitors or other staff about ways to incorporate mental health concepts into learning opportunities
- advice and information to parents and staff about mental health services and being wise consumers
- one-to-one counseling for children, parents, and staff

Topics for mental health training can include, but are not limited to, building self-esteem, personal health and wellness, guidance, childhood fears, complex family problems, physical/sexual abuse, family systems, community and family violence, substance abuse, and the impact of catastrophic illnesses on the family (e.g., HIV). Mental health training can include topics that overlap with other components such as identifying and discussing child development, features of healthy families, and building satisfying relationships.

Disabilities/Mental Health Services Coordination

(1) The grantee must ensure coordination between the disabilities coordinator and the staff person responsible for the mental health component to help teachers identify children who show signs of problems such as possible serious depression, withdrawal, anxiety or abuse.

The disabilities services coordinator, the mental health consultant, and staff members should coordinate their efforts to identify children with a disability in the social/emotional area. Staff will need information and training regarding those behaviors to determine which incidents are appropriate to document to

assist the mental health consultant to provide appropriate services. The mental health coordinator may want to bring parents and children with disabilities together to provide needed support and to bring forth issues of mutual concern.

Nutrition

Nutrition Objectives

The nutrition objectives include supporting and supplementing the nutritional needs of children; providing opportunities for staff and parents to learn about children's nutritional requirements; and creating opportunities for children, parents, and staff to explore healthy nutritional behaviors that reflect the diversity of the local community.

To that end, programs need to analyze the data collected to determine the nutritional strengths, patterns, and needs of the families and the community.

Nutrition Services

The planning of the nutrition services component is an inclusive process, involving an active role for staff, parents, community health representatives, and the Health Services Advisory Committee. The program should provide opportunities for practical application and skill building for parents and staff in the areas of menu development, nutritional requirements of children and adults, and community nutrition issues.

Staff training can stress the importance of staff addressing personal nutritional issues and can support staff knowledge, attitudes, and development of skills for healthy nutritional choices.

The nutritional experiences of children in the program can expand beyond designated meals and snacks to include classroom experience with preparation, exposure to a variety of nutritional foods that represent the cultural diversity of the population, and the development of an awareness of healthy nutritional choices.

Parent training can include a strong focus on consumerism to reflect budgeting skills; healthy menu planning such as low salt, low fat, or other menu adaptations; and access to food services and supports such as WIC, food banks, and cooperatives if appropriate. Training sessions might address factors such as family and cultural values as well as community preferences.

Disabilities/Nutrition Services Coordination

1 The disabilities coordinator must work with staff to ensure that provisions to meet special needs are incorporated into the nutrition program.

It is beneficial if programs provide staff with training that will assist all children, including children with disabilities, to participate in the nutrition program. The program may seek specific guidance from specialists such as physical therapists, occupational therapists, nutritionists, or dietitians to help staff and parents as they work with children who have problems with chewing, swallowing, and feeding themselves. Staff might need assistance in providing opportunities for children with disabilities to participate in meal and snack times with their peers.

In addition, programs should provide parents and staff guidance and training on menu planning for special dietary considerations.

Social Services

Social Services Objectives

The social services component of Head Start describes an organized method of assisting families to assess their needs and strengths. Programs can assess information gathered through family and community needs assessments to determine family health issues that have implications for health education activities for children, families, and staff.

Assessing family needs is a joint effort between staff and family members and allows programs to learn about the lives of their parents and children, including such factors as lifestyles and the circumstances that impact family health and well-being. It is an opportunity to recognize the strengths of individual families and to mutually establish goals. The family needs assessment is the basis of work with families and is a living document that begins at the time of enrollment, continues throughout the program year, and does not end until the family leaves Head Start.

Social Services Plan Content

Programs need to annually establish their recruitment and enrollment practices. The program definition of "most disadvantaged" or "neediest of the needy" may include those families and children coping with issues of health that are most prevalent in their communities. The recruitment and enrollment processes should

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seek out children and families systematically. While priority must be given to those families and children from economically disadvantaged homes, there are other enrollment criteria that may be locally considered, within income guidelines, such as substance abuse, community violence, terminal illness, and the need for parenting skills.

❶ Providing or referring for appropriate counseling

All staff can be provided with guidance that assists them in identifying and working with children and families with problems in health and wellness and providing assistance. Training can provide guidance in deciding when to provide health education versus when to make a referral to appropriate community agencies. These problems can cover a wide spectrum of issues including alcohol, tobacco, and other drug use; family violence; homelessness; lead poisoning; and HIV infection.

❷ Advocacy

Head Start programs can be participants in community-based strategies developed to increase a variety of services needed by low-income families and their children. A key focus can be to increase the availability and accessibility to a whole range of services such as affordable and adequate housing, tenants rights, health services, police protection, and employment. Advocacy efforts might also focus on medical, visual, and dental services for low-income people on Medicaid and/or with no medical coverage or insurance. Health education for staff and parents might include opportunities to learn about the environmental and social forces that are negatively affecting their and their families' health and well-being, and developing the advocacy skills to change them.

Local programs will need to assess areas of needed advocacy based on the problems of their community. Participation on local, county, and state councils, committees, and partnerships will increase Head Start's visibility within the community and bring issues of access and availability to the forefront.

❸ Record keeping and documentation

Information collected about family and community needs is a valuable resource for Head Start programs. Programs can establish a systematic method of analyzing these data and using them to identify and strengthen program activities including comprehensive health education.

To ensure that the health education program accurately meets the needs of children, parents, and staff, programs can use already existing data from assessing family and community needs and using such tools as the Program Information Report (PIR) and the program's annual self-assessment process. Program staff may need to be trained in issues of record keeping and documentation including such areas as developing interviewing techniques and analyzing data for pertinent information.

Recruitment and Enrollment of Children with Disabilities

❶ The grantee or delegate agency outreach and recruitment activities must incorporate specific actions to actively locate and recruit children with disabilities.

As a program's management team and parent policy group meet annually to evaluate their recruitment and enrollment strategies and criteria, special attention needs to be given to outreach strategies to locate children with disabilities who meet eligibility requirements and whose parents desire the child's participation. Defining the "neediest of needy" will reflect the needs of local communities and appropriate services available, with an understanding that including children with severe disabilities for whom Head Start is an appropriate placement, is a goal and priority.

Parent Involvement

Parent Involvement Objectives

Head Start program philosophy is based upon the concept that parents are the primary and most important educators of their children. Staff may need to place emphasis on developing and expanding the role of the parent. Parent participation in health education can be encouraged in a variety of ways including planning, participating in, and evaluating health education efforts; co-leading health education activities for children, other parents, or staff; volunteering in agency activities such as health fairs, or assisting in measuring heights and weights;

representing the program on policy groups, the Health Services Advisory Committee, community boards of directors and committees; making contact with community agencies and organizations; and serving as advocates for the Head Start agency.

Parent Involvement Plan Content: Parent Participation

Head Start staff should be available if parents need guidance, information, and support in parenting, health, and personal development. Learning opportunities for parents can occur during home visits, training, parent meetings, discussion groups, information dissemination, and group socialization/center activities. Head Start staff help parents participate in parent education opportunities by providing adjunct services such as space, transportation, and child care. Parent education activities should be planned and delivered in a manner that is consistent with sound adult learning principles such as creating interactive sessions and encouraging participants to share their knowledge and life experiences.

In collaboration with the social services staff, parents can be provided with information regarding available community resources, such as health, mental health, and dental services; adult classes in consumer education; financial assistance programs; family and employment training and counseling; emergency food sources; and housing agencies. Effective parent training will include a skill-building focus so that parents gain the skills needed to effectively use available resources.

Parent Involvement Plan Content: Enhancing Development of Parenting Skills

Parenting training and education can be comprehensive and can include opportunities for personal development and skill building around issues including understanding the developmental continuum of children's growth, learning conflict resolution and decision-making skills, and helping children develop self-esteem through nurturing and positive reinforcement.

Parent Participation and Transition of Children into Head Start and from Head Start to Public School

Program staff, assisted by appropriate service professionals, can provide parents with information on how to foster and support the development of their child with disabilities. They can also provide follow-up activities to bridge and reinforce program activities at home. Parents may need assistance in locating available resources including Supplemental Security Income (SSI); Early and Periodic Screening, Diagnosis, and Treatment (EPSDT); and any other resource that might help them with either services and/or monetary support. The assistance provided to parents can be geared to empowering parents to become the first and primary advocates for the rights of their children and themselves.

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EDC

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CHOOSING
WELLNESS

Comprehensive Health Education *Resource Guide*

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A Guide for Head Start Programs

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Choosing Wellness:
Comprehensive Health Education Resource Guide

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Developed by EDC
for Head Start through funding
by Johnson & Johnson

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The Scope of the Problem

Since 1965 the needs of the children and families served by Head Start have become more complex, as have those of our society in general. Concerned teachers report seeing children who are more aggressive, impulsive, or withdrawn than in the past (Lang, 1992). Families are stressed by greater poverty, diminished support systems, unavailable health services, and increased health, environmental, and social problems. Consider the following statistics.

- The United States has one of the highest infant mortality rates of any industrialized nation. Death rates for black children are twice as high as those for white children (Children's Defense Fund, 1991).
- Childhood injury is the principal public health problem in America today, causing more deaths than all childhood diseases combined and contributing greatly to childhood disabilities (Children's Safety Network, 1991).
- Homicide is the second-leading cause of injury death among children and adolescents. In 1988, 9 children a day (3,290 children per year) were victims of homicide in the United States (Children's Safety Network, 1991).
- Approximately 2,000 U.S. children have been diagnosed with AIDS and 13,000 are predicted to develop AIDS by the year 2000 (Martin, 1992).
- The leading cause of injury to women between the ages of 15 and 44 is domestic abuse.
- Approximately one in five preschoolers lives with an adult who is abusing alcohol or other substances (Collins and Anderson, n. d.). Abuse of alcohol and the use of other substances are highly correlated with domestic and community violence, child physical and sexual abuse, and child neglect.
- In the U.S. an estimated one in eight children under the age of 12 (5.5 million) is suffering from hunger (Martin, 1992).
- If tobacco use stopped entirely today throughout the nation, an estimated 390,000 fewer Americans would die before their time each year (U.S. Department of Health and Human Services, 1990).

Head Start staff members work every day with families and communities facing these problems, spending much of their time trying to find and access essential yet scarce health services for families with low incomes. At the same time, staff members have become increasingly aware of the need for prevention. For Head Start programs, an overarching challenge is to find ways, with the resources available, to promote prevention and respond to the many health-related needs of children and families.

A Working Solution

Health education for children and families has always been a part of Head Start's mandate. Comprehensive health education—an approach that goes beyond current practices—can help Head Start programs improve the health and well-being of children, families, and staff.

Comprehensive health education addresses a wide range of topics related to physical, mental, emotional, and social health. It also strengthens and reinforces health-promoting skills in communication, decisionmaking, risk assessment, and advocacy. Such skill building is essential for fostering healthier individual behaviors as well as changing the social and environmental factors (e.g., poverty, racism, unavailable resources) that pose significant health risks to Head Start children, families, and staff.

Comprehensive health education is based on a set of beliefs that recognizes the value of educating people about prevention of injury and disease, health risks and health-promoting behaviors, the broad nature of health and well-being, and the interrelatedness of all the factors that influence health. Its aim is to have a lifelong impact on attitudes about health and wellness, and health-promoting behaviors.

Using this Guide

How do Head Start staff and parents begin to develop a comprehensive health education program? What resources can they draw on to create a program that responds to the current and changing needs of their community? And how do they assess what's "out there"—health curricula and other materials currently available?

This guide will provide answers to some of these questions. It suggests programs, tools, and practical strategies for assessing existing health curricula for children, parents, and staff. It also provides information on materials and organizations to help Head Start programs design their own health education and further their health promotion efforts.

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This guide is divided into three main sections:

- a discussion on choosing health curricula
- an annotated listing of 250 health-related resources, including print and audiovisual resources for adult personal health and well-being; resources for parents and staff to use with children; resources for children; curricula; and health-related resource organizations
- subject and title indexes, for all resources listed

This guide is part of *Choosing Wellness*, a comprehensive health education package designed for Head Start and funded by Johnson & Johnson. The package also includes a promotional video and print materials, and a health education planning and implementation handbook. We hope that together these materials will assist Head Start programs in further reducing risk; preventing unnecessary illness and injury; becoming stronger advocates; and promoting wellness in themselves, the families and children they serve, and the communities in which they live.

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SECTION I

CHOOSING A HEALTH CURRICULUM

SECTION I

CHOOSING A HEALTH CURRICULUM

Criteria for Parents

Key Factors to Consider

Directions on How to Use this Tool to Evaluate a Health Curriculum for Parents

Health Education Curriculum Assessment Form Parent Curricula

Criteria for Staff

Key Factors to Consider

Directions on How to Use this Tool to Evaluate a Health Curriculum for Staff

Health Education Curriculum Assessment Form Staff Curricula

Criteria for Children

Key Factors to Consider

Directions on How to Use this Tool to Evaluate a Health Curriculum for Children

Health Education Curriculum Assessment Form Child Curricula

A curriculum is a set of instructional materials or guides designed to meet specific learner objectives through a series of experiences, activities, or exercises. Head Start programs can use and adapt many existing health curricula to meet the needs of children, families, and staff. This chapter is designed to help staff and parents systematically assess existing curricula to select the most appropriate materials for their program. Among the factors programs might consider are whether a curriculum:

- meshes with Head Start philosophy
- promotes best practice in health education
- is developmentally appropriate
- emphasizes the role of parents as prime educators of their children
- reflects an understanding of adult learning styles
- meets the needs of the local community
- represents the community's racial, cultural, and ethnic groups
- provides for relevant program options
- is affordable in cost

The assessment tools on the following pages were adapted from sections of "Criteria for Comprehensive Health Education Curricula" (English, et al., 1990) with help from Head Start staff and health education professionals throughout the country. These tools provide curricula reviewers with a framework for rating each factor and recording comments about strengths and weaknesses.

Keep in mind that very few health curricula, if any, can meet all of a program's criteria. Most curricula cover single issues such as safety, mental health, dental health, or parenting, for example, although a few curricula for children do address health education topics more comprehensively. And, to date, no curriculum focuses on the health issues of children, parents, and staff in a coordinated and reinforcing manner. Therefore, programs will need to combine and adapt parts of several curricula to create a comprehensive curriculum that reflects their program's own health needs.

When choosing curricula, involve a number of people—direct line staff, management staff, parents, and interested members of policy groups such as your program's Health Services Advisory Committee. By involving everyone in the decisionmaking, programs will be able to create a curriculum that meets the specific health needs of children, families, and staff.

Criteria for Parents

Health curricula for parents may address taking care of their children, as well as their own personal health and wellness. In selecting a health curriculum for parents, it is critical that materials be based on sound and current health information and practice. All health curricula developed or used should be reviewed by the health coordinator and all members of the Head Start management team, the mental health consultant, and the Health Services Advisory Committee to assure that the health content is sound and up-to-date.

Below are nine additional key factors to help your program choose health education curricula for parents, along with indicators for each key factor. A sample tool for assessing or adapting parent curricula follows this section.

Key Factors to Consider

❶ The curriculum *builds on strengths and views parents as interested, capable adults* if it:

- includes sound adult education principles that promote the active involvement of parents
- acknowledges parents' and families' individual differences, attitudes, beliefs, and personal situations
- builds on prior knowledge and respects life experiences
- acknowledges parents' cultural differences and values, and the impact of these on child rearing
- provides brief, self-contained, interactive sessions, in recognition of the time demands on parents

❷ The curriculum *encourages a positive approach to health education and promotion* if it:

- provides experiences that promote feelings of success, competence, and enjoyment of learning
- encourages parents to identify their own health needs and interests and to tailor health education activities to meet those needs
- provides parents with strategies for observing their child's growth and development
- provides information on the general health needs of children, such as nurturance, consistency, hygiene, adequate nutrition, rest, sleep, discipline, and play
- provides strategies for accessing resources such as child health services, adult health services, respite, and dental care

❸ The curriculum *supports and enhances the parental role as the principal influence on a child's development* if it:

- acknowledges and reinforces the primary role of parents in both its content and tone
- reflects an awareness of the impact of parental attitudes and behavior on child development
- reinforces what the child is learning in the program about health
- provides information on relevant child development issues that enables parents to have appropriate expectations of their children
- provides information on identifying signs and symptoms of illnesses in children and responding appropriately to them

❹ The curriculum *emphasizes knowledge, attitudes, and skills* if it:

- provides activities designed to achieve cognitive, emotional, and behavioral objectives
- enhances skills through exercises such as role play, simulation, problem posing, and practice
- provides hands-on, interactive exercises
- encourages interaction among parents and links them with peers and supportive staff, as colleagues and/or mentors

❺ The curriculum *helps meet or exceed the Performance Standards* if it:

- promotes the role of parents as partners to staff and as the primary educators of their children
- provides information regarding social and emotional well-being
- provides guidance on familiarizing parents with children's health screening information
- promotes and supports parents' roles in selecting appropriate health providers and obtaining preventive care for the family
- provides guidance on familiarizing parents with the linkage between sound nutritional practices and health
- provides parents with opportunities to be involved in food preparation for children, recognizing and encouraging cultural, racial, and ethnic differences

❻ The curriculum content and approach *are relevant to the needs of Head Start parents* if they:

- take into account a range of literacy skills
- acknowledge the importance of providing parents with practical support such as transportation, child care, and a comfortable setting to encourage parent participation
- provide ways to present information on such potentially sensitive subjects as the use of tobacco, alcohol, or other substances; HIV infection; domestic violence; or child abuse and neglect
- provide materials that are relevant to the needs of families and children from diverse backgrounds and living in poverty

❼ The curriculum *provides guidance, support, and resources for implementation* if it:

- promotes sound adult learning principles
- provides materials and guidance for parent educators in a form that is clear, well-organized, and easy to use
- provides ways to determine major community health and nutrition problems
- provides methods for parent educators to incorporate additional health topics of interest and need to parents
- contains enough background information for parent educators to fully understand concepts being explored
- provides materials that are easy to reproduce and suggests only materials that are easy to obtain
- provides resource information, groups, and materials if parent educators or parents want to explore topics further

8 The curriculum *includes and positively reflects equity and diversity* if it:

- contains no demeaning labels or stereotypes based on race, culture, gender, or ability
- depicts a variety of racial and cultural groups
- presents contributions and achievements of diverse racial and cultural groups and depicts differences in customs
- shows a socioeconomic range for different racial and cultural groups
- depicts gender equity, showing males and females in a range of professions, with equal representation in mental and physical activities
- reflects both traditional and nontraditional family make-up
- depicts individuals with disabilities

9 The curriculum *meets your program's specific criteria* if it:

- fulfills the priorities identified by the staff, the Health Services Advisory Committee, and the Policy Council
- adapts itself to the cultural and ethnic mix of parents
- addresses major health issues in the community
- matches the objectives of parents and staff

The sample tool on the following page incorporates these nine criteria and can be used or adapted to assess health curricula for parents.

Directions on How to Use this Tool to Evaluate a Health Curriculum for Parents

1. Fill in the curriculum's title, its health content, and your program's specific criteria (#9).
2. Ask someone knowledgeable about the specific content (Head Start manager, Health Services Advisory Committee member, mental health consultant) to review the curriculum first to assure that the specific health content is valid and up-to-date.
3. Review the curriculum and estimate the degree to which each key factor is successfully met. Circle the appropriate number (use the indicators on the previous pages to help you in this process).
4. After you circle a number, jot down any comments you have.
5. Add the numbers circled and fill in the total score.
6. Use your ratings on key factors, comments, and total score as a basis for discussing the appropriateness of the curriculum for your program. The tool can also be used to compare strengths and weaknesses of several curricula, or to help you adapt or develop your own health curriculum.

Health Education Curriculum Assessment Form

Parent Curricula

Title of Curriculum: _____

- ☐ personal health and healthy decision making
- ☐ parenting

Health Content: _____

		DEGREE TO WHICH CRITERION IS MET					
			To some degree				Needs/
	Criteria	Completely	75%	50%	25%	Not at all	Comments
❶	Curriculum builds on strengths and views parents as interested, capable adults	4	3	2	1	0	
❷	Curriculum encourages a positive approach to health education and promotion	4	3	2	1	0	
❸	Curriculum supports and enhances the parental role as the principal influence on a child's development	4	3	2	1	0	
❹	Curriculum emphasizes knowledge, attitudes, and skills	4	3	2	1	0	
❺	Curriculum helps meet or exceed the Performance Standards	4	3	2	1	0	
❻	Curriculum content and approach are relevant to the needs of Head Start parents	4	3	2	1	0	
❼	Curriculum provides guidance, support, and resources for implementation	4	3	2	1	0	
❽	Curriculum includes and positively reflects equity and diversity	4	3	2	1	0	
❾	Your program's specific criteria: _____	4	3	2	1	0	
	_____						
	_____						

Total score: ___of 36

Criteria for Staff

Health curricula for staff may address providing a safe and healthy environment for children, as well as personal health and wellness for staff themselves. Like health curriculum materials for children and parents, the materials selected for staff must be based on sound and current health information and practice. All health curricula developed or used should be reviewed by the health coordinator and all members of the Head Start management team, the mental health consultant, and the Health Services Advisory Committee to assure that the health content is sound and up-to-date.

Below are eight key factors to help your program choose curricula for staff, along with indicators of each key factor. A sample tool for assessing or adapting curricula for staff follows this section.

Key Factors to Consider

❶ The curriculum *builds on strengths and views staff as interested, capable adults* if it:

- acknowledges staff members' individual differences, attitudes, beliefs, and personal situations
- builds upon prior knowledge and respects life experiences
- acknowledges the time demands on staff and provides brief, self-contained, interactive sessions
- encourages staff members to identify their own health needs and provides training that is responsive to those needs

❷ The curriculum *encourages a positive approach to health education and promotion* if it:

- provides experiences that promote feelings of success, competence, and enjoyment of learning
- encourages each staff person to take responsibility for promoting health and safety within the Head Start environment
- provides materials that interest staff
- permits flexibility for staff

3 The curriculum *emphasizes knowledge, attitudes, and skills* if it:

- demonstrates an awareness of the impact of staff attitudes and behavior on children and families in the program
- emphasizes the importance of skill building for staff, and for the parents and children with whom they work
- enhances skills through exercises such as role play, simulation, problem posing, and practice
- provides activities designed to achieve cognitive, emotional, and behavioral objectives

4 The curriculum *helps meet or exceed the Performance Standards* if it:

- provides relevant child growth and development information, including early identification of problems
- stresses the importance of providing a safe, healthy, and developmentally appropriate environment for children
- reinforces what the children and parents are learning in the classroom about health
- is comprehensive and inclusive, containing medical, dental, mental health, nutrition, and information about disabilities
- stresses the need to target information on specific personal, family, and community strengths and needs

5 The curriculum content and approach *are relevant to the needs of Head Start staff* if they:

- encourage staff to identify and address their own health needs
- provide information on general health needs of children and adults, such as adequate nutrition, rest, play or activity, and friendships
- provide appropriate expectations for children in their program and provide information on limit setting and guidance
- acknowledge the importance of providing staff with practical support such as transportation, child care, and occasional activities during work hours to encourage participation

- provide guidance on how to access health care in general and on the health resources available to families
- take into account a range of literacy levels
- provide materials relevant to the needs of staff from diverse backgrounds
- encourage staff wellness, so that staff can serve as role models to parents and children

6 The curriculum *provides guidance, support, and resources for implementation* if it:

- promotes sound adult learning principles for trainers
- provides materials and guidance in a form that is clear, well-organized, and easy to use
- provides materials that are easy to reproduce and suggests only materials that are easy to obtain
- provides enough background information for trainers to fully understand the concepts being explored
- provides resource information, groups, and materials if the trainer or staff want to explore topics further
- provides ways to determine and address major community health and nutrition problems

7 The curriculum *includes and positively reflects equity and diversity* if it:

- contains no demeaning labels or stereotypes based on race, culture, gender, or ability
- depicts a variety of racial and cultural groups
- presents contributions and achievements of diverse racial and cultural groups and depicts differences in customs
- shows a socioeconomic range for different racial and cultural groups
- depicts gender equity, showing males and females in a range of professions with equal representation in mental and physical activities
- reflects both traditional and nontraditional family make-up
- depicts individuals with disabilities

8 The curriculum *meets your program's specific criteria* if it:

- fulfills the priorities identified by the staff, the Health Services Advisory Committee, and the Policy Council
- adapts itself to the cultural and ethnic mix of staff
- addresses major health issues in the community
- matches the objectives of parents and staff

The sample tool on the following page incorporates these eight criteria and can be used or adapted to assess health curricula for staff.

Directions on How to Use this Tool to Evaluate a Health Curriculum for Staff

1. Fill in the curriculum's title, its health content, and your program's specific criteria (#8).
2. Ask someone knowledgeable about the specific content (Head Start manager, Health Services Advisory Committee member, mental health consultant) to review the curriculum first to assure that the specific health content is valid and up-to-date.
3. Review the curriculum and estimate the degree to which each key factor is successfully met. Circle the appropriate number (use the indicators on the previous pages to help you in this process).
4. After you circle a number, jot down any comments you have.
5. Add the numbers circled and fill in the total score.
6. Use your ratings on key factors, comments, and total score as a basis for discussing the appropriateness of the curriculum for your program. The tool can also be used to compare strengths and weaknesses of several curricula, or to help you adapt or develop your own health curriculum.

Health Education Curriculum Assessment Form

Staff Curricula

Title of Curriculum: _____

- ☐ personal health and healthy decision making
- ☐ providing a safe and healthy environment for children

Health Content: _____

	Criteria	DEGREE TO WHICH CRITERION IS MET: Completely	To some degree: 75%	50%	25%	Not at all	Needs/ Comments
1	Curriculum builds on strengths and views staff as interested, capable adults	4	3	2	1	0	
2	Curriculum encourages a positive health education and promotion approach	4	3	2	1	0	
3	Curriculum emphasizes knowledge, attitudes, and skills	4	3	2	1	0	
4	Curriculum helps meet or exceed the Performance Standards	4	3	2	1	0	
5	Curriculum content and approach are relevant to the needs of Head Start staff	4	3	2	1	0	
6	Curriculum provides guidance, support, and resources for implementation	4	3	2	1	0	
7	Curriculum includes and positively reflects equity and diversity	4	3	2	1	0	
8	Your program's specific criteria:	4	3	2	1	0	

_____

_____

_____

Total score: ___of 32

Criteria for Children

In selecting children's health curricula, it is critical that materials be based on sound and current health information and practice. All health curricula developed or used should be reviewed by the health coordinator and all members of the Head Start management team, the mental health consultant, and the Health Services Advisory Committee to assure that the health content is sound and up-to-date.

Below are seven additional key factors to help you choose health curricula for children, along with indicators for each key factor. A sample tool for assessing or adapting children's health curricula follows this section.

Key Factors to Consider

1. A curriculum *is developmentally appropriate* if it:
   - promotes opportunities for children to choose from among a variety of self-directed activities and explore through active involvement
   - is based on child-initiated, child-directed, and teacher-supported play and/or inquiries
   - is individualized and based on a teacher's observations and recordings of each child's special interests and developmental progress
   - is easily adaptable and responsive to individual ability, development, and learning style
   - emphasizes exploration, creative thinking, and interaction, rather than right or wrong answers, memorization, or drills

2. A curriculum *builds on the child's knowledge, interests, and skills* if it:
   - provides activities that are designed to achieve cognitive, affective, and behavioral objectives for each child
   - facilitates concept learning and skill development in an integrated, individualized, and natural way
   - focuses on the importance of skill building, such as decision making
   - emphasizes learning about health through activities that are part of the child's everyday experience and culture
   - provides a variety of activities about health that are interesting and meaningful to the child

❸ A curriculum *helps programs meet or exceed the Performance Standards* if it:

- encourages social and emotional growth and self-esteem
- emphasizes that health education needs to be integrated into ongoing classroom and other program activities
- provides experiences and activities that familiarize children with all of the health services they will receive
- provides information and opportunities for hands-on skill building in dental health
- provides information on the variety of ways nutritional needs can be met and recognizes individual cultural and ethnic differences regarding food
- provides opportunities for children to be involved in activities related to meal service, including selecting, preparing, serving, and enjoying a wide variety of nutritious foods

❹ The curriculum *stresses the value of parent involvement* if it:

- involves parents and families as partners
- tailors the parent materials to parents' needs and interests
- provides specific strategies, concrete examples, and/or materials that bridge experiences in the program with those at home
- displays parent materials and handouts that take into account a range of literacy levels

❺ The curriculum *provides guidance, support, and resources for implementation* if it:

- provides clear, well-organized, and easy-to-use materials and guidance for staff
- takes into account a range of literacy levels
- helps staff increase or decrease an activity's level of difficulty to reflect the skill level of the children
- suggests only materials that are easily obtainable or can be easily or inexpensively made
- provides enough background information for staff to fully understand the concepts being explored
- provides information on resources, groups, and materials if staff want to explore topics further

6. The curriculum *includes and positively reflects equity and diversity* if it:

   - contains no demeaning labels or stereotypes based on race, culture, gender, or ability
   - displays a variety of racial and cultural groups
   - presents contributions and achievements of diverse racial and cultural groups and depicts differences in customs
   - shows a socioeconomic range for different racial and cultural groups
   - depicts gender equity, showing males and females in a range of professions, with equal representation in mental and physical activities
   - reflects both traditional and nontraditional family make-up
   - depicts individuals with disabilities

7. The curriculum *meets your program's specific criteria* if it:

   - adapts itself to the specific cultural and ethnic mix of families and children in the local community
   - addresses major health issues in the local community
   - matches the objectives set by parents and staff
   - meets the priorities that have been identified by staff, the Health Services Advisory Committee, and the Policy Council

The sample tool on the following page incorporates these seven criteria and can be used to assess or adapt health curricula for children.

Directions on How to Use this Tool to Evaluate a Health Curriculum for Children

1. Fill in the curriculum's title, its health content, and your program's specific criteria (#7).
2. Ask someone knowledgeable about the specific health-related content (Head Start manager, Health Services Advisory Committee member, mental health consultant) to review the curriculum first to assure that the specific health content is valid and up-to-date.
3. Review the curriculum and estimate the degree to which each key factor is successfully addressed. Circle the appropriate number (use the indicators on the previous pages to help with this process).
4. After you circle a number, jot down any comments you have.
5. Add the numbers circled and fill in the total score.
6. Use your ratings on key factors, comments, and total score as a basis for discussing the appropriateness of the curriculum for your program. The tool can also be used to compare strengths and weaknesses of several curricula, or to help you adapt or develop your own health curriculum.

Health Education Curriculum Assessment Form

Child Curricula

Title of Curriculum: _____

Health Content: _____

	Criteria	DEGREE TO WHICH CRITERION IS MET: Completely	To some degree: 75%	50%	25%	Not at all	Needs/ Comments
1	Curriculum is developmentally appropriate	4	3	2	1	0	
2	Curriculum builds knowledge, interests, and skills	4	3	2	1	0	
3	Curriculum helps meet or exceed the Performance Standards	4	3	2	1	0	
4	Curriculum stresses the value of parent involvement	4	3	2	1	0	
5	Curriculum provides guidance, support, and resources for implementation	4	3	2	1	0	
6	Curriculum includes and positively reflects equity and diversity	4	3	2	1	0	
7	Your program's specific criteria: _____ _____ _____	4	3	2	1	0	

Total score: _of 28

SECTION II

RESOURCES

SECTION II

RESOURCES

About These Resources

For Parents and Staff: Personal Health and Well-Being
Numbers 1-27

For Parents and Staff: Children's Health and Well-Being—General
Numbers 28-48

For Parents and Staff: Children's Health and Well-Being—Related to the Program
Numbers 49-63

For Children: Books and Tapes
Numbers 64-84

For Children: Manipulatives
Numbers 85-150

For Children: Multi-Media Kits
Numbers 151-156

Curricula For Parents
Numbers 157-166

Curricula For Staff
Numbers 167-170

Curricula For Children
Numbers 171-191

Organizations for Health Education and Promotion
Numbers 192-259

About these Resources

The following health resources for children, parents, and staff include curricula, print and audiovisual materials, manipulatives for children, and health resource organizations. We included resource materials in this guide based on several criteria. These materials are:

- judged by Head Start staff or professionals in the health education field to be strong in health content
- viewed as generally appropriate for the varied needs, interests, and family life styles within the Head Start community, based on the key factors described in the previous sections
- used and recommended by Head Start programs (but not endorsed by the Head Start Bureau)
- deemed timely and current
- designated specifically for children ages three to five
- readily available for purchase, with a majority being free or relatively low cost

A number of other relevant health resources that meet these criteria are available to Head Start programs. Exclusion from this guide does not mean that a resource was judged to be inappropriate for Head Start. Rather, sheer volume dictated that we limit the number of entries. Many of the resource organizations listed at the end of this section, as well as publishers cited in the annotations, offer free catalogues with information about additional health resource materials.

The health curricula referenced in this guide cover a range of health topics. Our review of these curricula, using the key factors presented in the previous section, indicated that some of the children's activities, while strong in health content, may need to be adapted for developmental appropriateness. Likewise, some materials for parents may need modification to reflect more diverse literacy levels and cultures.

In general, programs should review curricula based on the criteria suggested in the previous section, along with criteria established by the local program. No curriculum will offer everything. It is up to your program to adapt and modify resources to assure that health education activities are appropriate to the needs, interests, and skill levels of children, parents, and staff in the program.

Each entry in the following listing contains identifying information about the resource, an annotation, and an identification number. The subject and title indexes at the end of this guide use these identification numbers to help readers access appropriate resources quickly.

We believe these resources will enable programs to implement a comprehensive health education and health promotion program for children, parents, and staff. For assistance in planning and developing a health education and promotion program in Head Start, see the companion manual to this guide, *Choosing Wellness: Comprehensive Health Education Planning and Implementation Handbook*.

For Parents and Staff: Personal Health and Well-Being

1

Title	**Build Your Stress Resistance** (one in a series of health education booklets)
Author	Parlay International
Publisher	Parlay International
Date	1990
Cost	$33.00
Category	Booklet
No. of Pages	14
Availability	Parlay International 5900 Hollis Street, Suite Q, P.O. Box 8817 Emeryville, CA 94662-0817
Format	Reproducible pages of stress reduction tips
Health Content	Stress management
Annotation	This resource contains 14 stress-reducing ideas that can be used to cope with burnout, headaches, upper body tension, dealing with difficult people, and other similar stressors. Also included are stress assessment tools and a worksheet for getting started on one's own stress reduction.

2

Title	**Consumer's Guide to Free Medical Information: By Phone and by Mail**
Author	Arthur Winter, M.D., and Ruth Winter
Publisher	Prentice-Hall, Inc.
Date	1993
Cost	$14.95
Category	Book
No. of Pages	328
Availability	Prentice-Hall Publishing Route 9 West Englewood Cliffs, NJ 07632
Format	315 health topics, 400+ organizations, with descriptions of each
Health Content	Comprehensive
Annotation	The Winters' book contains over 300 health-related topics, with ways to access free information by phone and mail. Medical topics are listed alphabetically. Organizations listed give easy-to-read descriptions and services offered.

3

Title	**Creative Units Courseware**
Author	Johnson & Johnson, Health Management, Inc.
Publisher	Johnson & Johnson
Date	1989-90
Cost	Cost varies with materials
Category	Training Pamphlets
No. of Pages	6 per pamphlet
Availability	Johnson & Johnson, Health Management, Inc. 410 George Street New Brunswick, NJ 08901 (800) 443-3682
Format	7 major health topics, divided into 180+ pamphlets with training guides
Health Content	Stress, weight, nutrition, smoking, blood pressure, exercise, general health
Annotation	Each topical pamphlet, with accompanying leader's guide, allows further exploration into a subject. The materials are colorful and encourage participation. The entire program allows for customizing to one's audience, since only those modules of interest need be purchased.

4

Title	**The Doctor's Book of Home Remedies**
Author	Editors of Prevention Magazine Health Books
Publisher	Rodale Press
Date	1991
Cost	$6.99
Category	Book
No. of Pages	738
Availability	Rodale Press 33 East Minor Street Emmaus, PA 18098 (800) 848-4735
Format	A to Z listing of health problems, with tips and techniques to try before calling the doctor
Health Content	Comprehensive
Annotation	This easy-to-read book gives useful, doctor-tested tips on what to do for a variety of common ailments, listed alphabetically. A 1993 version of the book, available in paperback for $27.95, includes hundreds of additional everyday health problems, such as insomnia, flu, depression, and stress.

5

Title	**Feelin' Good: A Wellness Program for Head Start Employees**
Author	Cathleen Hosner
Publisher	Tri-County Head Start
Date	1991
Cost	$5.00 to cover copying and postage
Category	Guide/Manual
No. of Pages	24
Availability	Cathleen Hosner/Tri-County Head Start 39617 Red Arrow Highway Paw Paw, MI 49079
Format	Handout from training conference
Health Content	Personal health
Annotation	Hosner's wellness program consists of several ideas: surveying employees regarding their needs, keeping track of health-promoting activities that will earn incentives, on-the-job performance issues, and bibliography.

6

Title	**Healing and the Mind: A Resource Guide for the Field of Mind Body Health**
Author	Institute of Noetic Sciences and The Fetzer Institute
Publisher	Institute of Noetic Sciences and The Fetzer Institute
Date	1993
Cost	$5.00
Category	Resource Guide
No. of Pages	47
Availability	The Fetzer Institute 9292 West KL Avenue Kalamazoo, MI 49009
Format	Written and audiovisual resources based on the PBS series
Health Content	Personal health, risk reduction, stress management
Annotation	Based on the popular 5-part series, *Healing and the Mind with Bill Moyers*, this resource guide presents an overview of books, tapes, journals, and organizations focused on the connection between mind and body health. Materials range from practical to spiritual, with emphasis on the latter.

7

Title **Heartland Community Health Programs**

Author Bloomington Heart and Health Program

Publisher Bloomington Heart and Health Program

Date 1989

Cost Cost varies with program

Category Multimedia Kit

Availability Bloomington Heart and Health Program
1900 West Old Shakopee Road
Bloomington, MN 55431

Format Booklets, videos, slides, manuals of several different health programs

Health Content Nutrition, cardiac health, smoking cessation, fitness, weight management

Annotation This organization offers affordable health promotion programs that are easily customized for adult groups, such as parent workshops or staff trainings. Features include ready-to-use materials, budgets, promotional aids and suggestions, and program evaluations.

8

Title **It's Making Me Sick: Alcohol and High Blood Pressure**
(one in a series of health education booklets)

Author Health Literacy Project/Health Promotion Council of S.E. Pennsylvania

Publisher Health Promotion Council of S.E. Pennsylvania, Inc.

Date 1992

Cost Samples available; other costs vary

Category Booklet

No. of Pages 4

Availability Health Literacy Project/Health Promotion Council of S.E. Pennsylvania
311 South Juniper Street, Room 308
Philadelphia, PA 19107

Format Booklet written at or below 6th grade level and available in Spanish

Health Content Blood pressure, alcohol abuse

Annotation In this booklet a man discusses, with a supportive friend, the relationship between his drinking and his hypertension. More than 25 health education booklets are available, targeted to an African-American and Latino audience, and focusing on behavior contributing to chronic disease.

9

Title	**Kicking Your Stress Habits: A Do-It-Yourself Guide for Coping with Stress**
Author	Donald A. Tubesing
Publisher	Whole Person Associates, Inc.
Date	1989
Cost	$14.95
Category	Workbook
No. of Pages	189
Availability	Whole Person Associates, Inc. 1702 East Jefferson Street Duluth, MN 55812-2029
Format	13 chapters on how to manage stress
Health Content	Stress management
Annotation	Tubesing's workbook allows the reader to follow along by keeping lists of one's own stressors as each is challenged and managed. Various coping strategies and alternatives are presented for consideration.

10

Title	**Marketing Booze to Blacks**
Author	Center for Science in the Public Interest/Institute on Black Chemical Abuse
Publisher	Center for Science in the Public Interest
Date	1990
Cost	$29.95
Category	Audiovisual
Availability	Center for Science in the Public Interest 1875 Connecticut Avenue, NW, Suite 300 Washington, DC 20009-5728
Format	Video
Health Content	Alcoholism, substance abuse
Annotation	This realistic 17-minute video examines the implicit and explicit messages in alcohol ads targeted to African-Americans and gives examples of how some communities have chosen to deal with the problem by increased advocacy and personal responsibility.

11

Title	**Minding the Body, Mending the Mind**
Author	Joan Borysenko
Publisher	Simon & Schuster, Inc.
Date	1988
Cost	$11.00
Category	Audiocassette
Availability	Simon & Schuster 1230 Avenue of the Americas New York, NY 10020
Format	60-minute tape on relaxation techniques
Health Content	Stress management
Annotation	Borysenko's tape focuses on the facts and some techniques for reducing stress. She describes how to elicit the "relaxation response" and make it work to lessen some physical ailments. The tape seems especially useful for those who are ready to make changes in their health behavior.

12

Title	**Minute Health Tips: Medical Advice and Facts at a Glance**
Author	Thomas G. Welch, M.D.
Publisher	DCI/Chronimed Publishing
Date	1991
Cost	$8.95
Category	Book
No. of Pages	101
Availability	DCI/Chronimed Publishing P.O. Box 47945 Minneapolis, MN 55447-9727
Format	Health topics listed alphabetically
Health Content	Comprehensive
Annotation	Welch's book answers routine health questions and offers preventive medical tips on a variety of topics, including back pain, smoking cessation, relief of hay fever, headaches, and other common ailments.

13

Title	**The New Our Bodies, Ourselves**
Author	Boston Women's Health Book Collective
Publisher	Touchstone/Simon & Schuster
Date	1992
Cost	$20.00
Category	Book
No. of Pages	752
Availability	Simon & Schuster 1230 Avenue of the Americas New York, NY 10020
Format	27 chapters on individual health-related topics
Health Content	Comprehensive
Annotation	This "bible" of the Women's Health Movement covers every aspect of women's health, plus more. Some of the many topics covered are: occupational health, body image, violence against women, sexuality, stress, HIV/AIDS, health and healing, and substance abuse.

14

Title	**Personal Health Profile**
Author	Texas Department of Health–Adult Health Program
Publisher	Texas Department of Health
Date	1987
Cost	No cost
Category	Handout
No. of Pages	2
Availability	Texas Department of Health–Adult Health Program 1100 West 49th Street Austin, TX 78756-3199
Format	Reproducible handout
Health Content	Personal health, risk reduction, disease prevention
Annotation	This brief health profile, when used in conjunction with other personal health material, provides adults with a visual means of determining how present-day habits influence the risk of such chronic diseases as stroke, cancer, diabetes, and heart disease.

15

Title **Personal Wellness**
(one of more than 180 health education booklets)

Author Winters Communications, Inc.

Publisher Winters Communications, Inc.

Date 1991

Cost $ .95

Category Booklet

No. of Pages 16

Availability Winters Communications, Inc.
14740 Lake Magdalene Circle
Tampa, FL 33613-1708

Format Tips and information on adopting positive health behavior

Health Content Stress, exercise, diet, smoking, blood pressure, alcohol and drug use

Annotation This booklet, along with others in the series on such topics as basic back care and smoking cessation, offers commonsense information to help understand one's risk and to make more informed choices about emotional and physical well-being.

16

Title **The Relaxation and Stress Reduction Workbook (3rd Ed.)**

Author Martha Davis, Elizabeth R. Eshelman, and Matthew McKay

Publisher New Harbinger Publications, Inc.

Date 1992

Cost $13.95

Category Activity Book/ Workbook

No. of Pages 249

Availability New Harbinger Publications, Inc.
5674 Shattuck Avenue
Oakland, CA 94609

Format 20 chapters of information and exercises

Health Content Wellness, stress reduction

Annotation This workbook offers practical information and stress-reducing exercises, which the authors suggest be done daily. Some of the techniques include relaxation, meditation, visualization, assertiveness training, stress, and time management.

17

Title	**Straight from the Heart**
Author	Vida Health Communications, Inc.
Publisher	Vida Health Communications, Inc.
Date	1992
Cost	Free preview; $275.00 purchase
Category	Audiovisual
Availability	Vida Health Communications, Inc. 6 Bigelow Street Cambridge, MA 02139 (617) 864-4334
Format	Video
Health Content	Substance abuse
Annotation	This poignant 28-minute film chronicles the lives of six woman, representing different cultural backgrounds, as they describe their substance abuse problems, ambivalence about treatment, impact on their families, and recovery.

18

Title	**Street Smarts: How to Avoid Being a Victim**
Author	Video Publishing House, Inc.
Publisher	Video Publishing House, Inc.
Date	1992
Cost	$150.00 rental; $250.00 purchase
Category	Audiovisual
Availability	Video Publishing House, Inc. 930 N. National Parkway, Suite 505 Schaumberg, IL 60173 (800) 824-8889
Format	Video
Health Content	Safety
Annotation	This 55-minute video features a detective talking with a live audience on the ways to avoid becoming a target of street crime. His four major points—being a tough target, attracting attention, denying privacy to the perpetrator, and taking action—are useful and empowering.

19

Title **Take Care of Your Breasts**
(one in a series)

Author National Institutes of Health/National Cancer Institute

Publisher National Cancer Institute

Date 1993

Cost No cost

Category Pamphlet

No. of Pages 4

Availability National Cancer Institute
9000 Rockville Pike, Bldg. 31, Rm. 10A-24
Bethesda, MD 20892
(800) 4-CANCER

Format Illustrated pamphlet for audience of limited literacy or English skills

Health Content Personal health, disease prevention

Annotation Designed for a lower-literacy audience, this series plainly and graphically explains the importance of breast and pelvic exams, mammograms, PAP tests, and more.

20

Title **Taking Control: An Action Handbook on Women and Tobacco**

Author Canadian Council on Smoking and Health

Publisher Canadian Council on Smoking and Health

Date 1989

Cost $4.00

Category Handbook

No. of Pages 44

Availability Canadian Council on Smoking and Health
1202 170 Laurier Avenue West
Ottawa, Ontario, Canada K1P 5V5

Format Four sections, including references

Health Content Smoking cessation

Annotation This handbook puts forth a universal message about the dangers of women smoking, and offers helpful suggestions for stopping. Historical and medical information is extensive; ideas for effecting change on a broader level are also included.

21

Title **Walking for Wellness Program: National Black Women's Health Project**

Author National Black Women's Health Project

Publisher National Black Women's Health Project

Date 1993

Cost No cost

Category Wellness Program

Availability Walking for Wellness: National Black Women's Health Project
1237 Ralph D. Abernathy Boulevard, SW
Atlanta, GA 30310
(404) 758-9590

Format Walking program

Health Content Exercise, risk reduction, safety, personal health

Annotation This national health promotion initiative, targeted toward African-American women, goes beyond racial and economic lines and encourages women to reduce their risk factors and make healthy life style changes. Program staff are available to help others duplicate this nationally piloted project.

22

Title **The Wellness Encyclopedia: The Comprehensive Family Resource for Safeguarding Health and Preventing Illness**

Author Health Letter Associates

Publisher Houghton Mifflin Company

Date 1991

Cost $17.95

Category Book

No. of Pages 542

Availability Houghton Mifflin Company
One Beacon Street
Boston, MA 02108

Format 5 major sections with sub-listings

Health Content Comprehensive

Annotation Hundreds of topics are discussed in this dense, fact-filled encyclopedia. It is arranged in the following sections: longevity, nutrition, exercise, self-care, environment, and safety. Each section is further subdivided. Prevention and wellness are stressed throughout this extensive resource.

23

Title **Wellness Made Easy: 101 Tips for Better Health**

Author University of California, Berkeley Wellness Letter

Publisher University of California

Date 1990

Cost $1.00 to Berkeley Wellness Letter

Category Book

No. of Pages 44

Availability 101 Health Tips
P.O. Box 420235
Palm Coast, FL 32132-0235

Format Tips on nutrition, fitness, stress management, self-care, and safe travel

Health Content Stress management, nutrition, safety, fitness

Annotation This resource contains 101 practical tips that affect diet, fitness, stress level, and travel. The tips are easy-to-read, commonsense suggestions that emphasize prevention and taking charge of one's own health.

24

Title **Wellness: Skills for Lifestyle Change**
(one in a series of health education booklets)

Author Great Performance, Inc.

Publisher Great Performance, Inc.

Date 1988

Cost $3.00

Category Booklet

No. of Pages 16

Availability Great Performance Inc.
14964 N.W. Greenbrier Parkway
Portland, OR 97006

Format 5-part booklet on identifying and dealing with life's stresses

Health Content Stress management

Annotation This breezy booklet on taking better control of one's own health is part of a series on similar topics, with specific, practical suggestions for identifying and managing stress factors. Included are a quiz and contract for measuring one's own risk factors and rewards for success.

25

Title **Wellness: Small Changes You Can Use to Make A Big Difference**

Author Regina Sara Ryan and John W. Travis

Publisher Ten Speed Press

Date 1991

Cost $5.95

Category Book

No. of Pages 148

Availability Ten Speed Press
P.O. Box 7123
Berkeley, CA 94707

Format 4 sections with simple exercises and bibliographies

Health Content Personal health, risk reduction, stress management

Annotation This book gives practical suggestions for living a healthier lifestyle and focuses on issues of preventive health care and self-awareness in reaching that goal. Thirty-two "processes" are grouped into (1) Getting a Grip; (2) Loosening Up; (3) Taking Action; and (4) One Step Beyond.

26

Title **What Everyone Should Know About Wellness**
(part of a series on health education)

Author Channing L. Bete Co., Inc.

Publisher Channing L. Bete Co., Inc.

Date 1988

Cost $1.00; less when ordered in quantity

Category Booklet

No. of Pages 16

Availability Channing L. Bete Co., Inc.
200 State Road
South Deerfield, MA 01373-0200

Format Illustrated booklet

Health Content Wellness, stress, nutrition, exercise, smoking, alcohol use

Annotation This illustrated, cartoon-like booklet is written in an easy-to-read style, with the emphasis on prevention and tips for changing behavior. Hundreds of booklets, written in a similar style, are available on such topics as stress management, self-esteem, nutrition, and smoking.

21

Title	**You Can Stop Smoking** (part of a series on health education)
Author	University of New England, AHEC Health Literacy Center
Publisher	University of New England, AHEC Health Literacy Center
Date	1991
Cost	$.25 for sample; $1.00 for master
Category	Pamphlet
No. of Pages	4
Availability	University of New England–Health Literacy Center 11 Hills Beach Road Biddeford, ME 04005
Format	Illustrated booklet written for limited-literacy audience
Health Content	Smoking cessation
Annotation	This booklet, one of more than 80 easy-to-read pamphlets in the Health Literacy Center's health education series, is designed as "user-friendly health information at a glance." The reproducible booklets offer facts and tips on such topics as children's health, injuries, cancer, sexual harrassment, and heart disease.

For Parents and Staff: Children's Health and Well-Being—General

28

Title	**Are You Sad Too? Helping Children Deal with Loss and Death**
Author	Dinah Seibert, Judy Drolet, and Joyce Fetro
Publisher	ETR Associates
Date	1993
Cost	$14.95
Category	Book
No. of Pages	155
Availability	ETR Associates P.O. Box 1830 Santa Cruz, CA 95061-1830
Format	7 chapters with bibliography and references
Health Content	Death and dying
Annotation	This resource, while not written solely for preschool age, does provide concrete suggestions for staff and parents for helping young children explore their feelings about loss and death.

29

Title	**Body Rights: What Would You Do If...?**
Author	Marilyn J. Kile
Publisher	American Guidance Service
Date	1986
Cost	$16.25 for 10 booklets
Category	Guide/Manual
No. of Pages	23
Availability	American Guidance Service 4201 Woodland Road Circle Pines, MN 55014-1796
Format	A how-to guide for parents to help them empower their children to say no
Health Content	Safety
Annotation	This guidebook contains specific, practical suggestions for parents on how to teach their children to protect themselves in the face of potential sexual abuse.

30

Title **Building for the Future: Nutrition Guidance for the Child Nutrition Programs**

Author U.S. Department of Agriculture

Publisher U.S. Department of Agriculture/Child Nutrition Programs

Date 1992

Cost No cost

Category Book

No. of Pages 66

Availability U.S. Department of Agriculture
Food and Nutrition Service
3010 Park Center Drive, Room 607
Alexandria, VA 22302-1594

Format 7 sections on dietary guidelines, with glossary and other resources

Health Content Nutrition

Annotation This resource features a colorful presentation and overview on how to present healthy meals, with age-appropriate suggestions for preschool children.

31

Title **Childhood Emergencies—What to Do**

Author Marin Child Care Council

Publisher Bull Publishing Company

Date 1991

Cost $12.95

Category Guide/Manual

No. of Pages 44

Availability Bull Publishing Company
P.O. Box 208
Palo Alto, CA 94302-0208

Format Easy-to-use flip chart on handling health emergencies

Health Content First aid, safety

Annotation This resource gives immediate, practical steps on how to deal with emergencies in the classroom or at home. Bites, abrasions, choking, bleeding, and seizures are among the emergencies listed.

32

Title	**Creative Food Experiences for Children**
Author	Mary T. Goodwin and Gerry Pollen
Publisher	Center for Science in the Public Interest
Date	1990
Cost	$7.95
Category	Book
No. of Pages	256
Availability	Center for Science in the Public Interest 1501 Sixteenth Street, NW Washington, DC 20036
Format	7 chapters of information and activities with recipes and resources
Health Content	Nutrition
Annotation	Goodwin and Pollen's book is a comprehensive source on nutritional facts and activities, particularly with young children, and contains some reference to ethnic cooking.

33

Title	**Does AIDS Hurt? Educating Young Children about AIDS**
Author	Marcia Quackenbush and Sylvia Villarreal
Publisher	ETR Associates
Date	1992
Cost	$14.95
Category	Book
No. of Pages	150
Availability	ETR Associates P.O. Box 1830 Santa Cruz, CA 95061-1830
Format	13 chapters, with appendices on related resources
Health Content	AIDS, sexuality
Annotation	This frank and factual book on how to talk with young children under 10 about HIV and AIDS has particular sensitivity to preschool age as well as to urban, drug-using populations.

34

Title **Help Me Learn, Help Me Grow**
(also available in Spanish)

Author National Health/Education Consortium

Publisher National Commission to Prevent Infant Mortality

Date 1992

Cost $28.00 for "sampler"

Category Audiovisual

No. of Pages 15 (guide)

Availability National Commission to Prevent Infant Mortality
330 C Street, NW, Switzer Bldg., Room 2014
Washington, DC 20201
(202) 205-8364

Format Series of videos with accompanying materials

Health Content Parenting, nutrition, prenatal care, immunizations

Annotation This series of videos examines the critical connection between parents' good health and their children's ability to learn. This health education awareness campaign seems well-suited for parent group meetings.

35

Title **HIV/AIDS: A Challenge To Us All**

Author The Pediatric AIDS Foundation

Publisher The Pediatric AIDS Foundation

Date 1992

Cost No cost

Category Audiovisual

No. of Pages 51 (book)

Availability Pediatric AIDS Foundation
1311 Colorado Avenue
Santa Monica, CA 90404
(310) 395-9051

Format 2 videos—(1) vignettes of parents and children; (2) parent meeting; and accompanying book

Health Content HIV/AIDS

Annotation This 2-video package, with accompanying book, outlines how to organize a successful parent meeting on HIV/AIDS, as well as how to talk to children about the virus. The useful appendices list further resources.

36

Title	**I Don't Feel Good: A Guide to Childhood Complaints and Diseases**
Author	Jane W. Lammers
Publisher	ETR Associates
Date	1991
Cost	$14.95
Category	Book
No. of Pages	103
Availability	ETR Associates P.O. Box 1830 Santa Cruz, CA 95061-1830
Format	6 chapters on childhood illnesses, with references and appendices
Health Content	First aid, infectious disease, HIV/AIDS
Annotation	This handbook is a comprehensive guide to common and not-so-common childhood illnesses. It gives practical information and skills on how to respond to medical problems and emergencies that could arise at school.

37

Title	**Making Healthy Food Choices (Home & Garden Bulletin #250)**
Author	Human Nutrition Information Service
Publisher	U.S. Department of Agriculture
Date	1993
Cost	$1.50
Category	Booklet
No. of Pages	17
Availability	United States Government Printing Office Superintendent of Documents P.O. Box 371954 Pittsburgh, PA 15250-7954
Format	10 short sections on nutritional topics
Health Content	Nutrition
Annotation	This booklet is designed to help families learn more about how to choose and prepare foods. It contains useful information on such topics as weight control, cholesterol, shopping tips, and food preparation for children. The booklet is nicely illustrated and easy to read.

38

Title

Parents' Check List for the Prevention of Child Abuse

Author Elizabeth D. Drake and Anne E. Gilroy

Publisher Child Care Publications

Date 1993

Cost $2.00

Category Booklet

No. of Pages 17

Availability Kidsrights
10100 Park Cedar Drive
Charlotte, NC 28210

Format How-to guide in dealing with stress, physical, and emotional abuse

Health Content Sexual abuse, stress

Annotation This short, easy-to-read check list, also available in Spanish, gives quick tips on parenting when parent stress and anger mount, and when abuse is suspected. Suggestions range from giving "time outs" to praising children often and showing them your love.

39

Title

Parents' Guide to the Development of Preschool Children with Disabilities

Author National Library Service for the Blind and Physically Handicapped

Publisher The Library of Congress

Date May 1992

Cost No cost

Category Resource Guide

No. of Pages 22

Availability National Library Service for the Blind and Physically Handicapped
The Library of Congress, Reference Section
Washington, DC 20542

Format 4 sections on materials and resources for preschool children

Health Content Disabilities

Annotation This particular issue features special-format materials; educational games, toys and play equipment; annotated bibliography; and listings of national organizations concerned with preschool children with disabilities.

40

Title **Pediatric AIDS: A Time of Crisis**

Author The Association for the Care of Children's Health

Publisher The Association for the Care of Children's Health

Date 1989

Cost $25.00 preview; $85.00 purchase

Category Audiovisual

Availability Association for the Care of Children's Health
7910 Woodmont Avenue, Suite 300
Bethesda, MD 20814

Format Video

Health Content HIV/AIDS

Annotation This 23-minute video offers a candid look at the emotional, social, and medical aspects of AIDS. While the views of many providers and parents are heard, the video chronicles the experiences of one family living directly with AIDS.

41

Title **Positively Different: Creating a Bias-Free Environment for Young Children**

Author Ana Consuelo Matiella

Publisher ETR Associates

Date 1991

Cost $14.95

Category Book

No. of Pages 94

Availability ETR Associates
P.O. Box 1830
Santa Cruz, CA 95061-1830

Format 5 chapters on accepting differences among people, plus bibliographies

Health Content Self-esteem, ethnicity, equity

Annotation While suitable for children in kindergarten or above, this book contains adaptable suggestions for creating a bias-free environment for younger children as well. It focuses on respecting and valuing differences among people.

42

Title	**Safe Passages: A Guide for Teaching Children Personal Safety**
Author	Karla Hull
Publisher	Dawn Sign Press
Date	1986
Cost	$9.95
Category	Book
No. of Pages	146
Availability	Dawn Sign Press 9080 Activity Road, Suite A San Diego, CA 92126
Format	Guidelines and 10 activities dealing with personal safety for preschoolers
Health Content	Safety, sexual abuse prevention
Annotation	Hulls's book contains practical step-by-step activities for adults to teach personal safety to children. A special section for preschool-age children includes topics like "The Street Where I Live" and "My Body."

43

Title	**Single Mother's Resource Handbook** (also available in Spanish)
Author	Annette Ferando, David Newbert, et al.
Publisher	WEEA Publishing Center/Education Development Center
Date	1992
Cost	$6.75
Category	Handbook
No. of Pages	32
Availability	Women's Education Equity Act Publishing Center Education Development Center, Inc. 55 Chapel Street Newton, MA 02158-1060 (617) 969-7100; (800) 225-4276
Format	Chapters on assertiveness, relaxing, parenting, being positive, and sexuality
Health Content	Parenting, sexuality, mental health, self-esteem
Annotation	This handbook gives practical suggestions for single mothers on how to build a nurturing environment for their children.

44

Title	**Smiling at Yourself: Educating Young Children about Stress and Self-Esteem**
Author	Allen N. Mendler
Publisher	ETR Associates
Date	1990
Cost	$14.95
Category	Book
No. of Pages	145
Availability	ETR Associates P.O. Box 1830 Santa Cruz, CA 95061-1830
Format	A 5-chapter activity guide with introduction and appendices
Health Content	Stress management, self-esteem
Annotation	Mendler's book gives insight into the causes and symptoms of stress for children and presents techniques for relieving it, while building positive self-esteem.

45

Title	**Starting Early: A Guide to Federal Resources in Maternal and Child Health**
Author	National Center for Education in Maternal and Child Health
Publisher	National Center for Educatio Maternal and Child Health
Date	1988
Cost	No cost
Category	Resource Guide
No. of Pages	167
Availability	National Maternal and Child Health Clearinghouse 38th and R Streets, NW Washington, DC 20057
Format	An annotated resource guide of maternal and child health topics
Health Content	Comprehensive
Annotation	This extensive, easy-to-use guide to health information lists resources by subject and organization. To be revised in 1994, this guide simplifies the search for free or low-cost materials on almost every health topic.

46

Title	**Talking About Death**
Author	Earl Grollman
Publisher	Beacon Press
Date	1990
Cost	$11.95
Category	Book
No. of Pages	118
Availability	Beacon Press 25 Beacon Street Boston, MA 02108-2800
Format	Formal text, with a story for children, parent's guide, and resources
Health Content	Death and dying
Annotation	Grollman's sensitive approach to death includes the importance of talking honestly and openly with young children, even preschoolers. His annotated list of resources and organizations is especially useful.

47

Title	**Teaching Children About Food**
Author	Christine Berman and Jacki Fromer
Publisher	Redleaf Press
Date	1991
Cost	$8.95
Category	Book
No. of Pages	85
Availability	Redleaf Press 450 N. Syndicate, Suite 5 St. Paul, MN 55104-4125
Format	Chapters with activities
Health Content	Nutrition
Annotation	Berman and Fromer's book gives an overview of nutrition topics and methods for encouraging "food awareness" in preschoolers. It also presents such timely issues as world hunger, recycling, and consumerism.

158

48

Title	**When Sex is the Subject: Attitudes and Answers for Young Children**
Author	Pamela M. Wilson
Publisher	ETR Associates
Date	1991
Cost	$14.95
Category	Book
No. of Pages	104
Availability	ETR Associates P.O. Box 1830 Santa Cruz, CA 95061-1830
Format	5 chapters on sexuality, with definitions, organizations, and bibliography
Health Content	Sexuality
Annotation	This resource provides age-appropriate answers to children's common sexuality questions and is written in an open and frank manner.

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For Parents and Staff: Children's Health and Well-Being—Related to the Program

49

Title	**Anti-Bias Curriculum: Tools for Empowering Young Children**
Author	Louise Derman-Sparks and the A.B.C. Task Force
Publisher	National Association for the Education of Young Children
Date	1989
Cost	$7.00
Category	Book
No. of Pages	148
Availability	National Association for the Education of Young Children 1834 Connecticut Avenue, NW Washington, DC 20009-8777
Format	12 chapters of information and activities on creating an anti-bias curriculum
Health Content	Cultural differences, equity, disabilities
Annotation	This guide suggests activities, goals, and resources for staff on how to implement a bias-free environment for young children.

50

Title	**Caring for Our Children: National Health and Safety Performance Standards—Guidelines for Out-of-Home Child Care Programs**
Author	American Public Health Association and American Academy of Pediatrics
Publisher	American Public Health Association
Date	1992
Cost	$50.00; $35.00 for APHA members
Category	Book
No. of Pages	440
Availability	American Public Health Association Publication Sales Department 5037 Washington, DC 20061-5037
Format	Chapters related to health and safety issues
Health Content	General health, nutrition, infectious disease, environmental quality
Annotation	This publication addresses the health and safety needs of children ranging from infants to 12-year-olds. It defines how to plan, implement, and assess quality child care programs from a health perspective.

51

Title **Getting a Head Start on HIV**

Author National Pediatric HIV Resource Center

Publisher National Pediatric HIV Resource Center

Date 1992

Cost $10.00

Category Guide/Manual

No. of Pages 56

Availability National Pediatric HIV Resource Center
15 South Ninth Street
Newark, NJ 07107
(800) 362-0071

Format 9 chapters with glossary and resource list

Health Content HIV, AIDS

Annotation A thorough presentation of how to work with HIV-infected children and their families, this resource covers the social, emotional, legal, and educational issues for young children with HIV.

52

Title **Health and Safety in Child Care**

Author Susan Aronson, M.D.

Publisher Harper Collins

Date 1991

Cost $30.50

Category Book

No. of Pages 246

Availability Harper Collins Publishers
4747 W. State Road 2
La Porte, IN 46350

Format 13 chapters with resources, sample forms, bibliography

Health Content Comprehensive

Annotation Aronson's book examines all aspects of health and safety in the day care setting and gives appropriate, sensible guidelines for handling them. She covers such topics as illness and infection, nutrition, dental and mental health, child abuse, and AIDS, giving suggestions for staff in the classroom.

161

5 3

Title	**Healthy Young Children: A Manual for Programs**
Author	A.S. Kendrick, R. Kaufmann, and K.P. Messenger, Eds.
Publisher	National Association for the Education of Young Children
Date	1991
Cost	$15.00
Category	Book
No. of Pages	333
Availability	National Association for the Education of Young Children 1834 Connecticut Avenue, NW Washington, DC 20009-5786 (800) 424-2460
Format	7 sections on managing the health environment of young children
Health Content	Safety, first aid, nutrition, disabilities, illness
Annotation	This resource contains a wealth of specific information on the health needs of young children in day care programs and how to manage the environment to identify problems and keep children healthy and safe.

5 4

Title	**Maternal and Child Health Publications Catalog**
Author	Maternal and Child Health Bureau
Publisher	U.S. Department of Health and Human Services
Date	1992
Cost	No cost
Category	Catalog
No. of Pages	34
Availability	National Center for Education in Maternal and Child Health 38th and R Streets, NW Washington, DC 20057
Format	Catalog of free or low-cost health materials by topic and alphabetical listing
Health Content	Comprehensive
Annotation	This easy-to-read resource lists materials by topic, including those available in different languages.

55

Title **MCH Program Interchange: Focus on Training Materials for Early Childhood Health**

Author National Center for Education in Maternal and Child Health

Publisher National Center for Education in Maternal and Child Health

Date 1992

Cost No cost

Category Resource Guide

No. of Pages 18

Availability National Maternal and Child Health Clearinghouse
38th and R Streets, NW
Washington, DC 20057

Format An annotated list of materials on maternal and child health

Health Content Comprehensive

Annotation This annotated bibliography contains material on many health topics related to preschool children and lists sources for obtaining the materials.

56

Title **Mental Health in Head Start: A Wellness Approach**

Author Kirsten A. Hansen with Janet S. Martner

Publisher U.S. Department of Health and Human Services

Date 1991

Cost No cost

Category Guide/Manual

No. of Pages 202

Availability Head Start Publications Center
P.O. Box 26417
Alexandria, VA 22313-0417

Format 3-part manual on implementing a mental health program in the classroom

Health Content Mental health

Annotation Designed for mental health coordinators, this manual gives staff an overview of how to implement a mental health program in the classroom. There is a listing of journals and organizations for further information.

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57

Title	**Mental Health in Head Start—It's Everybody's Business**
Author	Child Development Center—Georgetown University
Publisher	Child Development Center—Georgetown University
Date	1990
Cost	No cost to Head Start programs
Category	Audiovisual
Availability	Interface Video Systems, Inc. 1233 20th Street, NW Washington, DC 20036
Format	Video
Health Content	Mental health
Annotation	This 17-minute video is meant to accompany Hansen and Martner's book, *Mental Health in Head Start: A Wellness Approach*. It presents an overview of what the mental health component is and how it is integrated into a Head Start program.

58

Title	**Nutrition Resources for Early Childhood: A Resource Guide**
Author	Susan Shapiro
Publisher	National Center for Education in Maternal and Child Health
Date	1990
Cost	No cost
Category	Resource Guide
No. of Pages	28
Availability	National Maternal and Child Health Clearinghouse 38th and R Streets Washington, DC 20057
Format	An annotated guide to nutrition materials and related resources
Health Content	Nutrition
Annotation	This resource guide lists free or low-cost nutrition materials, with particular focus on children with special needs. Most listings are current (1987+) and seem to reflect a wide variety of available material from various agencies.

59

Title	**Parenting Education Resource Guide**
Author	Head Start Bureau/Administration for Children and Families
Publisher	Head Start Bureau
Date	1993
Cost	No cost
Category	Resource Guide
No. of Pages	83
Availability	Head Start Publications Center P.O. Box 26417 Alexandria, VA 22313-0417
Format	Parenting education materials and sources listed by category
Health Content	Comprehensive
Annotation	This review of materials and sources is annotated and listed by category. While there are no publication dates on the parenting sources, phone numbers are available for further inquiry.

60

Title	**Patient Education Materials: A Resource Guide**
Author	O. Pickett, A. Wigton, and E. Cole, Eds.
Publisher	National Center for Education in Maternal and Child Health
Date	1991
Cost	No cost for single copies
Category	Resource Guide
No. of Pages	66
Availability	National Maternal and Child Health Clearinghouse 38th and R Streets, NW Washington, DC 20057
Format	An annotated resource guide by health topic, publisher, and organization
Health Content	Disease prevention, nutrition, minorities, substance abuse
Annotation	This resource guide lists materials for health professionals in many areas related to maternal and child health. Many listings are available in foreign languages; many organizations are listed for further materials.

61

Title	**Reducing Stress in Young Children's Lives**
Author	Janet B. McCracken, Ed.
Publisher	National Association for the Education of Young Children
Date	1986
Cost	$7.00
Category	Book
No. of Pages	169
Availability	National Association for the Education of Young Children 1834 Connecticut Avenue, NW Washington, DC 20009-5786
Format	Reprints of 30 articles from *Young Children*
Health Content	Stress reduction
Annotation	This assortment of articles focuses on practical ways to help children cope with daily stresses.

62

Title	**Serving Children with HIV Infection in Child Day Care**
Author	Child Welfare League of America
Publisher	Child Welfare League of America
Date	1991
Cost	$8.95
Category	Guide/Manual
No. of Pages	40
Availability	Child Welfare League of America 440 First Street, NW, Suite 310 Washington, DC 20001-2085
Format	Q & A format regarding the issues of having a child with HIV/AIDS in day care
Health Content	HIV/AIDS
Annotation	This guide presents straightforward answers on how to safeguard children, families, and staff, while meeting the special needs of children with HIV in day care.

63

Title	**Young Children in Poverty: An Annotated Bibliography of Books and Reports**
Author	Leigh Hallingby
Publisher	National Center for Children in Poverty/Columbia University
Date	1989
Cost	$3.00
Category	Resource Guide
No. of Pages	20
Availability	National Center for Children in Poverty Columbia University School of Public Health 143 Haven Avenue New York, NY 10032
Format	Annotated bibliography divided into 13 sections
Health Content	Poverty, minorities, single parenting, child health
Annotation	This annotated bibliography describes materials for young children and their families who are living in poverty. Most pertinent are resources on minorities, single mothers, maternal and child health.

64

Title	**The Balancing Girl**
Author	Berniece Rabe; Illustrated by Lillian Hoban
Publisher	E.P. Dutton
Date	1981
Cost	$4.99
Category	Children's Book
No. of Pages	30
Availability	E.P. Dutton P.O. Box 120 Bergenfield, NJ 07621
Format	Storybook with illustrations
Health Content	Disabilities
Annotation	This book chronicles an event in the school life of Margaret, who uses both wheelchair and crutches, and how she manages to prove to a classmate that she, too, can excel at something special.

65

Title	**Come Sit by Me**
Author	Margaret Merrifield; Illustrated by Heather Collins
Publisher	Women's Press
Date	1990
Cost	$6.95
Category	Children's Book
No. of Pages	30
Availability	Association for the Care of Children's Health 7910 Woodmont Avenue, Suite 300 Bethesda, MA 20814-3015 (301) 654-6549
Format	Storybook format with colorful pictures and a section on HIV/AIDS facts
Health Content	HIV/AIDS
Annotation	This book describes the acceptance of a child with AIDS into the classroom. Although meant for children ages 4 and up, the book can be read and adapted for young children asking questions about AIDS.

66

Title	**Curious George Goes to the Hospital**
Author	Margret and H.A. Rey
Publisher	Houghton Mifflin Company
Date	1966
Cost	$5.95
Category	Children's Book
No. of Pages	48
Availability	Houghton Mifflin Company One Beacon Street Boston, MA 02108
Format	Storybook with illustrations
Health Content	Hospitalization
Annotation	This book continues the engaging story of George, who is now making mischief as a hospital patient. He accidentally swallows a puzzle piece, ends up in surgery, and causes lots of good-natured trouble along the way.

67

Title	**Friends in the Park**
Author	Rochelle Bunnett; Photographs by Carl Sahlhoff
Publisher	Checkerboard Press, Inc.
Date	1993
Cost	$7.95
Category	Children's Book
No. of Pages	40
Availability	Checkerboard Press, Inc. 3131 Mount Pleasant Street Racine, WI 53404
Format	Storybook with photographs
Health Content	Disabilities
Annotation	Bunnett's book follows a group of young children as they spend a typical day in the park. The story reinforces the concept of inclusion in a natural way and shows how children are more alike than different.

68

Title	**Getting to Know Myself**
Author	Hap Palmer
Publisher	Educational Activities–Freeport, NY
Cost	$10.75
Category	Audiocassette
Availability	Kaplan School Supply Corp. 1310 Lewisville-Clemmons Road; P.O. Box 609 Lewisville, NC 27023-0609 (800) 334-2014
Format	Songs
Health Content	Motor development, body awareness
Annotation	This tape covers awareness of body image and the body's position in space, identification of body parts, movements of the body, and feelings and moods.

69

Title	**Going to Day Care**
Author	Fred Rogers
Publisher	G.P. Putnam's Sons
Date	1985
Cost	$3.95
Category	Children's Book
No. of Pages	32
Availability	Family Communications 4802 Fifth Avenue Pittsburgh, PA 15213 (412) 687-2990
Format	Story with photographs
Health Content	Mental health
Annotation	This book, along with others (*Going to the Doctor, Making Friends, Going to the Dentist, Moving, The New Baby*), affirm the positive and negative feelings children have toward many of the special events in their lives.

70

Title	**How About a Hug**
Author	Nan Holcomb; Illustrated by Tricia Taggart
Publisher	Jason & Nordic
Date	1988
Cost	$6.95 paperback; $13.95 hard cover
Category	Children's Book
No. of Pages	32
Availability	Jason & Nordic P.O. Box 441 Holidaysburg, PA 16648
Format	Illustrated storybook
Health Content	Disabilities
Annotation	This book presents the simple story of a child who wants a hug and who, incidentally, has Down syndrome.

71

Title	**I'll Miss You Mr. Hooper**
Author	Norman Stiles; Illustrated by Joe Mathieu
Publisher	Random House
Date	1984
Cost	$3.95
Category	Children's Book
No. of Pages	24
Availability	Random House 201 East 50th Street New York, NY 10022
Format	Illustrated storybook
Health Content	Death
Annotation	In this storybook Big Bird looks for Mr. Hooper all around Sesame Street and is reminded that Mr. Hooper has died. He finally comes to an acceptance of it, and places a picture of Mr. Hooper in his nest.

72

Title **It's My Body**
(available in Spanish as **Mi Cuerpo Es Mio**)

Author Lory Freeman; Illustrated by Carol Deach

Publisher Parenting Press, Inc.

Date 1982

Cost $3.95

Category Children's Book

No. of Pages 24

Availability Parenting Press, Inc.
P.O. Box 75267
Seattle, WA 98125
(800) 992-6657

Format Illustrated storybook

Health Content Sexual abuse prevention

Annotation This resource will open communication between adult and child about sharing their bodies and different kinds of touch. It reinforces two "touching codes" that children can learn to empower their feelings.

73

Title **It's Toddler Time**

Author Carol Hammett and Elaine Bueffet

Publisher Kimbo

Cost $10.75

Category Audiocassette

Availability Kaplan School Supply Corporation
1310 Lewisville-Clemmons Road; P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Format Songs and Guide

Health Content Fitness

Annotation This tape, like many others of its kind designed for movement and exercise, contains songs specifically for toddler fitness and development. Included are "Itsy Bitsy Spider" and "If You're Happy," as well as a guide for use.

74

Title **Learning Basic Skills through Music: Health and Safety**

Author Hap Palmer

Publisher Educational Activities, Freeport, NY

Cost $10.75

Category Audiocassette

Availability Kaplan School Supply Corporation
1310 Lewisville-Clemmons Road; P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Format Songs

Health Content General health, safety

Annotation Palmer's tape contains happy songs with catchy lyrics that teach cleanliness, a balanced diet, exercise, safety rules, and thoughtfulness to young children.

75

Title **Mommy Don't Go**

Author Elizabeth Crary; Illustrated by Marina Megale

Publisher Parenting Press, Inc.

Date 1986

Cost $4.95

Category Children's Book (part of series)

No. of Pages 30

Availability Parenting Press, Inc.
P.O. Box 75267
Seattle, WA 98125

Format Illustrated storybook

Health Content Mental health, growth, and development

Annotation This book presents the dilemma posed by Matthew's mother going on a trip, and the ways in which he can cope. Children can choose many alternatives that will help Matthew, as they discuss their own feelings.

76

Title	**My Body Belongs to Me**
Author	Kristin Baird; Illustrated by Inese Jansons
Publisher	American Guidance Service
Date	1986
Cost	$14.95
Category	Children's Book
No. of Pages	32
Availability	American Guidance Service 4201 Woodland Road Circle Pines, MN 55014-1796
Format	Illustrated picture book
Health Content	Sexuality, sexual abuse prevention
Annotation	Baird's book offers a frank discussion of body parts, in order to help children develop a healthy self-concept. Understanding that their body belongs to them is seen as a way of empowering children if threatened with potential sexual abuse or exploitation.

77

Title	**My Dentist** (also **My Doctor**)
Author	Harlow Rockwell
Publisher	Greenwillow Books
Date	1975
Cost	$3.95
Category	Children's Book
No. of Pages	32
Availability	William Morrow & Co., Inc. 1350 Avenue of the Americas New York, NY 10019
Format	Illustrated storybook
Health Content	Dental health
Annotation	This is a colorful book about a girl's trip to the dentist and her observations about all of the dentist's tools, such as x-ray camera, mirrors, and drill. *My Doctor* is similar, showing medical equipment in a doctor's office.

78

Title **My Doctor, My Friend**

Author Bennett Gemson

Publisher Activity Records, Inc.

Date 1984

Cost $10.95

Category Record

Availability Morrison School Supplies, Inc.
304 Industrial Way
San Carlos, CA 94070

Format Songs

Health Content Doctor visits, safety, hospitalization, new baby

Annotation This record contains cheerful songs designed to help children conquer their fears of and gain more confidence in doctors.

79

Title **Nana Upstairs & Nana Downstairs**

Author Tomie dePaola; Illustrated by Tomie dePaola

Publisher G.P. Putnam's Sons

Date 1973

Cost $13.95

Category Children's Book

No. of Pages 32

Availability G.P. Putnam's Sons
390 Murray Hill Parkway
East Rutherford, NJ 07073

Format Illustrated storybook

Health Content Death and dying

Annotation This book sensitively portrays Tommy's visits to the house that his active grandmother shares with his bedridden great-grandmother. The elder relative dies and Tommy copes with her loss.

80

Title	**Nathan's Day at Preschool**
Author	Susan Conlin and Susan L. Friedman
Publisher	Parenting Press, Inc.
Date	1991
Cost	$4.95
Category	Children's Book
No. of Pages	28
Availability	Waterfront Books 85 Crescent Road Burlington, VT 05401-4126
Format	Storybook that can be read as 1-page vignettes or as whole book
Health Content	Mental health
Annotation	This storybook enables children to explore their feelings about various events surrounding their day in child care. Some of the 1-page vignettes include being angry, happy, rejected, capable, and loving.

81

Title	**Preschool Aerobic Fun**
Author	Georgiana Stewart
Publisher	Kimbo
Cost	$10.75
Category	Audiocassette
Availability	Kaplan School Supply Corporation 1310 Lewisville-Clemmons Road; P.O. Box 609 Lewisville, NC 27023-0609 (800) 334-2014
Format	Songs and Guide
Health Content	Fitness
Annotation	This musical exercise tape provides aerobic fitness exercise for preschoolers, with warm-ups, stretches, vigorous movement, and cool-down activities. An accompanying guide is included.

82

Title	**Someone Special, Just Like You**
Author	Tricia Brown; Photographed by Fran Ortiz
Publisher	Henry Holt & Co.
Date	1984
Cost	$15.95
Category	Children's Book
No. of Pages	64
Availability	Henry Holt & Co. 115 West 18th Street New York, NY 10011
Format	Storybook with photographs
Health Content	Disabilities
Annotation	Brown's book contains nice photos and simple words that feature children with and without disabilities.

83

Title	**We Can Do It**
Author	Laura Dwight
Publisher	Checkerboard Press, Inc.
Date	1993
Cost	$7.95
Category	Children's Book
No. of Pages	40
Availability	Checkerboard Press, Inc. 3131 Mount Pleasant Street Racine, WI 53404
Format	Storybook with photographs
Health Content	Disabilities
Annotation	This colorful photographic picture book sensitively shows the daily events of five children with disabilities.

84

Title	**Who Am I?**
Author	Barry Head and Jim Seguin
Publisher	Family Communications, Inc.
Date	1975
Cost	$5.95
Category	Children's Book
No. of Pages	32
Availability	Family Communications, Inc. 4802 Fifth Avenue Pittsburgh, PA 15213
Format	Storybook with photographs
Health Content	Disabilities
Annotation	*Who Am I?* is an excellent picture book, which presents an African-American family doing average, everyday things. The child featured in the book has a hearing aid.

173

For Children: Manipulatives

85

Name **Ambulance**

Type of Product Wooden Vehicle

Cost $26.50

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This wooden vehicle with satin paint finish is approximately 12.5" long and 4.5" high.

86

Name **Ambulance**

Type of Product Giant Floor Puzzle

Cost $15.75

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This 19-piece puzzle measures approximately 24" by 36."

87

Name **Ambulance**

Type of Product Plastic Vehicle with Figures

Manufacturer Playmobil

Cost $34.95

Availability Call Playmobil at 1-800-752-9662 for distributor nearest you

Features The plastic ambulance comes with medical equipment and several figures, including one in a wheelchair and one on a stretcher.

88

Name **Ambulance Puzzle**

Type of Product Wooden Puzzle

Cost $10.75

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This 9-piece puzzle measures approximately 12" x 9."

89

Name **Anatomy Apron**

Type of Product Dress-up Clothing

Cost $19.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This washable vinyl apron is pre-printed with outlines of the heart, liver, lungs, intestines, kidneys, and stomach. Organs can "attach" with Velcro. Also included are a teacher's guide and activities for preschool and up.

90

Name **At the Doctors**

Type of Product Wooden Puzzle

Manufacturer Rolf

Cost $17.95

Availability Sandy and Son Education Supplies
1360 Cambridge Street
Cambridge, MA 02139
(800) 841-7529

Features This is a 15-20 piece multiracial puzzle showing an African-American physician examining a young, blond child.

180

91

Name **Body Part Puzzle**

Type of Product Wooden Puzzle

Cost $21.00

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This small-knob puzzle has 7 pieces and comes in white and African-American models.

92

Name **Body Parts Photo Cards**

Type of Product Color Photos

Cost $14.50

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features The set consists of 32 large color photos of children, both white and non-white, male and female, pointing to various body parts. It is excellent for matching body parts and words to pictures.

93

Name **Breakfast Foods**

Type of Product Plastic Play Food

Cost $16.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features Children can select some of these nutritious breakfast foods to start off the day—fried egg, 2 bacon slices, slice of bread, 3 strawberries, 2 pancakes with butter, and a glass of orange juice.

94

Name **Career Workers**

Type of Product Wooden Puzzle

Cost $8.75

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This is a 5-piece puzzle of workers and depicts a doctor (male, African-American) and nurse (female, white) as 2 of the 5 workers.

95

Name **Community Workers**

Type of Product Wooden Figures

Cost $47.00

Availability Childcraft
20 Kilmer Road, P.O. Box 3081
Edison, NJ 08818-3081
(800) 631-5652

Features This set of 12 multicultural figures includes a male and female doctor.

96

Name **Cooking Pots**

Type of Product Plastic Cookware

Cost Set of 4 = $12.95
Set of 8 = $23.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features These bright, colorful plastic pots include a frying pan, plus 3 saucepans. The larger set has twice the number of cooking pots.

97

Name **Dentist Puzzle**

Type of Product Wooden Puzzle

Cost $8.25

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This 11-piece puzzle shows a dentist (white) and young patient (white) in the dentist's chair.

98

Name **Dinner Set with Dishdrainer**

Type of Product Plastic Dinnerware

Cost $13.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This colorful 23-piece dinnerware set for 4 includes salt and pepper shaker, and is made of nontoxic plastic.

99

Name **Doctor Puzzle**

Type of Product Wooden Puzzle

Cost $7.00

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This 4-piece puzzle depicts a male doctor, patient in foot cast, and oversized thermometer and syringe.

100

Name **Doctor Puzzle**

Type of Product Wooden Puzzle

Cost $8.25

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This 11-piece puzzle shows an African-American male doctor, with a stethoscope, examining an African-American boy.

101

Name **Doctor Puzzle**

Type of Product Wooden Puzzle

Cost $8.25

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This 16-piece puzzle shows a female doctor examining an African-American boy while his mother looks on.

102

Name **Doctor/Nurse Reversible Vest**

Type of Product Dress-up Clothing

Cost $29.50

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This reversible doctor/nurse vest is washable polyester/cotton, one-size-fits-all, with an adjustable Velcro belt.

184

103

Name **Doctor's Costume**

Type of Product Dress-up Clothing

Cost $21.50

Availability Lakeshore Learning Materials
2695 E. Dominguez Street, P.O. Box 6261
Carson, CA 90749
(800) 421-5354

Features This realistic white lab coat has Velcro closures and comes with an elasticized mirrored headband.

104

Name **Doctor's Office Kit**

Type of Product Plastic Medical Kit

Cost $27.50

Availability Lakeshore Learning Materials
2695 E. Dominguez Street, P.O. Box 6261
Carson, CA 90749
(800) 421-5354

Features The kit includes big, chunky medical instruments: stethoscope; reflex hammer; blood pressure meter; x-ray machine; eye, nose, and throat gauge; phone; eye chart; and clock, all of which pack into a plastic case.

105

Name **Doctor's Uniform**

Type of Product Dress-up Clothing

Cost $15.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features The dress-up clothing includes surgical mask, cap, and gown in washable polyester/cotton material.

106

Name **Ethnic Dolls**

Type of Product Dolls

Cost $39.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features These anatomically correct dolls of varying race and ethnicity are available in female and male models. All are part of a "Just Born" series with realistic features.

107

Name **Family Puppets**

Type of Product Ethnic Puppets

Manufacturer Learning Resources

Cost $19.95

Availability Call Learning Resources at 1-800-222-3909 for distributor nearest you

Features This 5-piece set of family puppets is available in Asian, Latino, white, and African-American models. Adults are 10" tall, with washable vinyl heads.

108

Name **Feelings Puppets**

Type of Product Puppets (cloth)

Cost $37.00

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features These 10 multicultural, washable puppets, 5 female and 5 male, depict 5 emotions: anger, sadness, happiness, surprise, and sulking.

109

Name **First Aid Tent**

Type of Product Plastic Structure and Figures

Manufacturer Playmobil

Cost $34.95

Availability Call Playmobil at 1-800-752-9662 for distributor nearest you

Features This set includes a plastic "tent" and figures, with stretchers, medical personnel, and various life-support machines.

110

Name **Flannelboard Sets: Food Group, Nutrition, Grocery Store, and Balanced Meal**

Type of Product Flannelboard

Cost $11.95–$14.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features These colorful flannelboard sets, each with at least 50 pieces, let children choose their meals using healthful, appetizing foods.

111

Name **Flying Wheelchair**

Type of Product Wooden Puzzle

Manufacturer Wind River

Cost $17.95

Availability Wind River Products, Inc.
P.O. Box 840, Department PR
Carson, WA 98610
(800) 743-9463

Features This 15-piece puzzle depicts a child, holding balloons, in a wheelchair. Lost puzzle pieces can be reordered.

112

Name **Fruits**

Type of Product Plastic Play Food

Cost $9.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features The set of 7 fruits includes banana, orange, apple, cantaloupe, pear, watermelon slice, and 3 strawberries.

113

Name **Fruits and Vegetables Puzzle**

Type of Product Wooden Puzzle

Cost $28.00

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This painted wooden puzzle contains 16 colorful depictions of fruits and vegetables, each with a large knob for easy grasping.

114

Name **Fruits or Vegetables Large Knob Puzzle**

Type of Product Wooden Puzzle

Cost $19.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features Each of these 12" x 14" wooden puzzles has 5 labeled pieces made of nontoxic enamel, with large knobs for grasping.

188

115

Name **Giant Teeth and Brush**

Type of Product Plastic Model with Removable Molars

Cost $60.00

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This large plastic replica of the jaw, with 2 removable molars, can be "brushed" with toothbrushes.

116

Name **Girl with Crutches**

Type of Product Wooden Puzzle

Manufacturer Wind River

Cost $17.95

Availability Wind River Products, Inc.
P.O. Box 840, Department PR
Carson, WA 98610
(800) 743-9463

Features This 13-piece puzzle shows a child of color, holding balloons, on crutches. Lost pieces can be reordered.

117

Name **Greens**

Type of Product Plastic Play Food

Cost $4.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This collection of 4 realistic green vegetables includes asparagus, broccoli, pea pods, and green beans.

189

118

Name **Grocery Basket with Food**

Type of Product Plastic Basket with Play Food

Cost $7.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features The set contains 10 boxes of play food, such as milk, popcorn, and pizza, and a grocery basket to carry and store the food.

119

Name **Hippity, Hoppity Horse**

Type of Product Vinyl Horse

Cost $19.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This popular heavy-duty vinyl horse with handle can be used inside or out, and is 16" in diameter.

120

Name **Hospital Room**

Type of Product Plastic Structure with Figures

Manufacturer Playmobil

Cost $16.95

Availability Call Playmobil at 1-800-752-9662 for distributor nearest you

Features This set comes with 4 figures and medical equipment, including removable casts, crutches, and arm traction.

139

121

Name **Hula Hoops**

Type of Product Plastic Hoops

Cost $24.95 for set of 12

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features These 24" hoops come in different colors, and can also be ordered in 30" diameter, at a slightly higher cost.

122

Name **Inclusive Play People**

Type of Product Wooden Figures

Manufacturer Educational Equity Concepts, Inc.

Cost $25.00 for set of 6

Availability Educational Equity Concepts, Inc.
114 East 32 Street
New York, NY 10016
(212) 725-1803

Features These wooden figures, while not colorful, show 6 individuals, including one on crutches, one in a wheelchair, and one with a hearing aid. They measure from 3.5" to 6.5" high.

123

Name **International Food Set**

Type of Product Plastic Play Food

Cost $7.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features A taco, spaghetti with meat sauce, and 2 spring rolls are included in this international play food set.

124

Name **Large Family Group**

Type of Product Wooden Figures

Cost $25.00

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features Each 6-figure set includes mother, father, grandmother, grandfather, boy, and girl. Figures are approximately 8" tall and are available in Asian, white, African-American, and Latino models.

125

Name **Look 'N Do Cards & Learning About My Body Resource Book**

Type of Product Book and Puzzle

Cost $4.99 = cards
$5.95 = book

Availability Morrison School Supplies, Inc.
304 Industrial Way
San Carlos, CA 94070
(800) 950-4567

Features The set consists of 16 cards with head-to-toe body parts, which can be used with a resource book about body parts and the 5 senses. It also includes a large reproducible body-parts puzzle.

126

Name **Medical Kit**

Type of Product Plastic Toy

Manufacturer Battat

Cost $14.95

Availability Call Battat at 1-800-822-8828 for distributor nearest you

Features This toy medical kit contains an assortment of colorful instruments, including stethoscope, syringe, thermometer, blood pressure cuff, scissors, otoscope and more.

127

Name **Medical Kit**

Type of Product Plastic Toy

Cost $19.95

Availability Holcomb's Educational Materials
3205 Harvard Avenue
Cleveland, OH 44101-4636
(800) 362-9907

Features This plastic medical kit comes with several pieces of equipment and has usable items on the kit itself.

128

Name **Medical Kit**

Type of Product Plastic Toy

Cost $23.50

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features The kit consists of several medical instruments (including a workable stethoscope), all of which store inside the medical bag.

129

Name **Medical Puppets (Doctor or Nurse)**

Type of Product Hand Puppets

Cost $12.75

Availability Morrison School Supplies, Inc.
304 Industrial Way
San Carlos, CA 94070
(800) 950-4567

Features Each is an animal-like hand puppet with doctor or nurse uniform.

130

Name **Moody Bear**

Type of Product Wooden Toy

Cost $9.95

Availability Childswork/Childsplay, Center for Applied Psychology, Inc.
P.O. Box 1586
King of Prussia, PA 19406
(800) 962-1141

Features This set consists of wooden bear faces, torsos, legs, and feet that come in a 5" x 5" box. Moody Bear can have 6 different expressions (such as happy, sad, scared) and can be dressed for different weather conditions.

131

Name **Multicultural Community Puppets**

Type of Product Puppets

Cost $39.50

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features This set of 10 multicultural cloth hand puppets includes a female nurse and doctor, and a male doctor and dentist.

132

Name **Multicultural Hand Puppets**

Type of Product Hand Puppets

Cost $28.00 for 8 puppets

Availability J.L. Hammett Co.
P.O. Box 9057
Braintree, MA 02184-9057
(800) 333-4600

Features This set of 8 includes a male and female doctor, female nurse, and male dentist.

133

Name **Nurse or Doctor Puppet**

Type of Product Hand Puppet

Cost $7.95

Availability J.L. Hammett Co.
P.O. Box 9057
Braintree, MA 02184-9057
(800) 333-4600

Features The nurse or doctor hand puppet, available in African-American or white models, is made of nontoxic, washable material.

134

Name **Nurse Puzzle**

Type of Product Wooden Puzzle

Cost $8.25

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This 13-piece puzzle shows an African-American female nurse by a hospital bed with a new mother and infant.

135

Name **Nurse Puzzle**

Type of Product Wooden Puzzle

Cost $8.25

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This 11-piece puzzle depicts a Latino nurse at a scale weighing 2 children.

136

Name **Nurse's Uniform**

Type of Product Dress-up Clothing

Cost $13.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This outfit includes an adjustable cap and apron in washable polyester/cotton material.

137

Name **Operating Room**

Type of Product Plastic Figures

Manufacturer Playmobil

Cost $16.95

Availability Call Playmobil at 1-800-752-9662 for distributor nearest you

Features This operating room set consists of a bed with 4 figures and various kinds of medical equipment and surgical tools.

138

Name **Our Body Puzzle**

Type of Product Wooden Puzzle

Cost $27.95

Availability J.L. Hammett Co.
P.O. Box 9057
Braintree, MA 02184-9057
(800) 333-4600

Features This multilayered puzzle takes children beneath their skin to see muscles, a skeleton, and body organs.

196

139

Name **Our Teeth Puzzle**

Type of Product Wooden Puzzle

Cost $26.95

Availability J.L. Hammett Co.
P.O. Box 9057
Braintree, MA 02184-9057
(800) 333-4600

Features This 4-layered puzzle reveals what is beneath the enamel of a tooth.

140

Name **Paramedic**

Type of Product Plastic Figure

Manufacturer Playmobil

Cost $3.50

Availability Call Playmobil at 1-800-752-9662 for distributor nearest you

Features This set consists of a plastic figure, in uniform, with medical kit.

141

Name **Pliable Families**

Type of Product Dolls

Manufacturer Marvel Education Company

Cost $19.95

Availability Sandy & Son Educational Supplies
1360 Cambridge Street
Cambridge, MA 02139
(800) 841-7529

Features The set consists of 5 pliable rubber figures showing mother, father, and 3 children. Legs and torsos can be bent into various sitting and standing positions. The figures are scaled in size, from 4" tall (child) to 7" tall (father).

142

Name	**Shopping Cart**
Type of Product	Plastic Cart
Cost	$26.50
Availability	Kaplan School Supply Corporation P.O. Box 609 Lewisville, NC 27023-0609 (800) 334-2014
Features	This popular shopping cart has 2 compartments for carrying groceries and is just high enough for young children to push comfortably.

143

Name	**Sitting Rounder**
Type of Product	Plastic Cylinder
Cost	$61.95
Availability	Kaplan School Supply Corporation P.O. Box 609 Lewisville, NC 27023-0609 (800) 334-2014
Features	This sturdy, colorful cylinder can be used for sitting in, climbing, or rocking. Children fit inside its 15" surface as though they were "sitting in a circle."

144

Name	**Stethoscope**
Type of Product	Dress-up Prop
Cost	$7.50
Availability	Childcraft 20 Kilmer Road Edison, NJ 08818-3081 (800) 631-5652
Features	This 25" long stethoscope readily picks up the heartbeat and other low-frequency sounds, and is made of rubber, plastic, and metal.

145

Name **Surgeon's Costume**

Type of Product Dress-up Clothing

Cost $17.50

Availability Lakeshore Learning Materials
2695 E. Dominguez Street, P.O. Box 6261
Carson, CA 90749
(800) 421-5354

Features This Velcro-closing green gown and cap are made of a washable, polyester/cotton material.

146

Name **Three Tot Rocker**

Type of Product Plastic Rocker

Cost $39.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This colorful plastic teeter-totter can be used inside or out, by 1, 2 or 3 children. It is built extra wide for stability and has contoured seats, hand grips, and deep tread foot rests.

147

Name **Vegetables**

Type of Product Plastic Play Food

Cost $10.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features These 8 play food vegetables include corn, carrot, onion, tomato, cucumber, green pepper, celery, and lettuce.

148

Name **Vegetables and Fruits Poster Cards**

Type of Product 11" x 14" Posters

Cost $13.95

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features These 30 poster cards depict many fruits and vegetables and can be used in a variety of creative ways.

149

Name **Vinyl "Gertie" Ball**

Type of Product Vinyl Ball

Cost $3.50

Availability Kaplan School Supply Corporation
P.O. Box 609
Lewisville, NC 27023-0609
(800) 334-2014

Features This special ball can be grabbed, squeezed, hugged, thrown, bounced, and kicked. Made for children ages 4 and older, this textured ball is 9" in diameter, and made with nontoxic material.

150

Name **Wedgie Family**

Type of Product Wooden Figures

Cost $19.00

Availability Childcraft
20 Kilmer Road
Edison, NJ 08818-3081
(800) 631-5652

Features Each set includes mother, father, grandmother, grandfather, 3 boys, 1 girl, 1 child with a disability in a wheelchair, and 1 baby. They are available in African-American, white, Latino, or Asian sets. Adults are approximately 5" tall, and children are almost 4" tall.

For Children:
Multi-Media Kits

151

Title **The ABCs of Clean**

Author The Soap and Detergent Association

Publisher The Soap and Detergent Association

Date 1990

Cost No cost

Category Multimedia Kit

Availability The Soap and Detergent Association
475 Park Avenue South
New York, NY 10016

Format Storybook, audiotape, posters, video, parent handouts, teacher's guide

Health Content Handwashing, infectious disease prevention

Annotation This colorful preschool program, with some of its materials available in Spanish, focuses on the importance of proper handwashing and surface cleaning. It gives tips for helping to reduce the spread of infectious diseases in child care settings and at home.

152

Title **Bright Smiles, Bright Futures**

Author Colgate-Palmolive Company

Publisher Colgate-Palmolive Company

Date 1992

Cost $30.00 per kit; $3.00 shipping and handling

Category Multimedia Kit

Availability Colgate-Palmolive Company
Box JMH/458 Dunlap Street, North
St. Paul, MN 55104-4617
(800) 334-7734

Format Book, posters, teacher's guide, video, audiotape, stickers, parent brochure

Health Content Dental health, nutrition

Annotation This preschool program contains colorful, lively materials with a dental health focus. A kit for each classroom will be distributed to all Head Start programs in 1994.

153

Title	**CROSS: Children Riding on Sidewalks Safely**
Author	Bess-Gene Holt and Janet B. McCracken
Publisher	National Association for the Education of Young Children
Date	1990
Cost	$12.00
Category	Multimedia Kit
Availability	National Association for the Education of Young Children 1834 Connecticut Avenue, NW Washington, DC 20009-5786
Format	26-page storybook, parent brochure, poster, and teacher's guide
Health Content	Safety, injury prevention
Annotation	This kit is designed for teaching children how to take care of themselves while driving play vehicles, and seems easily adaptable to both urban and rural settings.

154

Title	**Starting Free: Good Air for Me** (also available in Spanish)
Author	American Cancer Society
Publisher	American Cancer Society
Date	1987
Cost	No cost
Category	Multi-media Kit
Availability	American Cancer Society 1599 Clifton Road, NE Atlanta, GA 30329
Format	5 storybooks, 3 puppets, poster, stickers, and home activity sheets
Health Content	Smoking
Annotation	This colorful, developmentally appropriate resource has engaging activities for preschoolers. One of its goals is to help children politely indicate their negative feelings about smoking to those around them.

155

Title **Walk in Traffic Safely (WITS)**

Author National Highway Traffic Safety Administration and NAEYC

Publisher National Association for the Education of Young Children

Date 1990

Cost $12.00

Category Multimedia Kit

Availability National Association for the Education of Young Children
1834 Connecticut Avenue, NW
Washington, DC 20009-5786
(800) 424-2460

Format 9 stories in 2 books, with accompanying parent and teacher guide

Health Content Safety, injury prevention

Annotation This kit teaches safe walking behavior to preschoolers. The multi-dimensional approach to pedestrian traffic education is both easy-to-read and engaging.

156

Title **We Love You—Buckle Up!**

Author National Highway Traffic Safety Administration and NAEYC

Publisher National Association for the Education of Young Child'ren (NAEYC)

Cost $7.00

Category Multimedia Kit

Availability National Association for the Education of Young Children
1834 Connecticut Avenue, NW
Washington, DC 20009-5786
(800) 424-2460

Format Packet of materials with book, posters, photocopiable handouts for parents

Health Content Safety

Annotation This packet contains an illustrated book, teacher's guide, and handouts for both children and parents, and focuses on the need to wear safety belts in automobiles. Additional resources, as well as suggestions for parent activities, are also included.

157

Title	**Active Parenting Today**
Author	Michael T. Popkin
Publisher	Active Parenting Publishers
Date	1993 (rev. from 1983)
Availability	Active Parenting Publishers 810 Franklin Court, Suite B Marietta, GA 30067 (800) 825-0060
Cost	$345.00
Format	Consists of a leader's guide, parent's guide, 2 videos, and promotional materials
Health Content	Parenting and additional materials on abuse prevention
Intended Audience	Preschool parents
Annotation	The curriculum includes many issues appropriate for Head Start parents, including communication, decision making, self-esteem, and skill building. However, it contains materials for parents at a high literacy level, and some examples will need to be adapted to be appropriate for an audience with limited financial resources.

158

Title	**The Black Parenting Education Program**
Author	Geraldine Carter
Publisher	Relevant Education Corporation
Date	1989
Availability	Relevant Education Corporation 4665 South 4th Street Arlington, VA 22204-1320
Cost	$159.00
Format	5 modules with instructor's manual, parent workbooks, video, and test packet
Health Content	Parenting, cultural diversity, child development, family
Intended Audience	Preschool parents
Annotation	Overall, this curriculum offers a thorough guide to children's development from birth to age 5. Illustrations depict children and parents of color, although the content does not focus much on the issue of raising an African-American child in America today.

159

Title

Exploring Parenting

Author

Roy Littlejohn Associates, Inc.

Publisher

U.S. Department of Health and Human Services
Administration for Children, Youth, and Families
Head Start Bureau

Date

1978

Availability

Head Start Publications Center
P.O. Box 26417
Alexandria, VA 22313-0417

Cost

No cost to Head Start programs

Format

A 20-lesson teacher guide and parent information sheets to accompany all lessons

Health Content

Parenting skills, with such health themes as injury prevention, relationship building, coping with stress, and dealing with anger

Intended Audience

Preschool parents

Annotation

This curriculum builds on strengths and views parents as the primary influence in the development of their children. It encourages positive health education and promotion and is relevant to the needs of Head Start parents. Overall, this curriculum was rated highly even though it is over 10 years old.

The curriculum may require modification or adaptation for varying literacy levels. It does not provide guidelines for handling sensitive topics and disclosure of sensitive information, which is likely to surface given the nature of the lesson topics.

160

Title	**Getting Involved: Workshops for Parents**
Author	Ellen Frede
Publisher	High/Scope Press
Date	1984
Availability	High Scope Press 600 North River Street Ypsilanti, MI 48197 (313) 485-2000
Cost	$15.00
Format	A 300-page, stand-alone document with a chapter on planning, leading, and evaluating parent workshops, followed by 9 chapters dealing with parenting as it relates to children's learning; based, in part, on the "Getting Involved" booklet series published by the Administration for Children, Youth, and Families
Health Content	Two of the chapters focus on children's learning and play
Intended Audience	Preschool parents
Annotation	"Your Child's Attitude Toward Learning" and "Your Child and Play" provide guidance for teaching parents about children's learning and fostering the parent/child relationship. Programs may find some of the enclosed materials vague and instructions for activities brief. Only the most experienced trainer would be able to use these materials to design a full, interactive session, with parents.

161

Title	**The Heart Treasure Chest**
Author	American Heart Association, Texas Affiliate
Publisher	American Heart Association National Center 7320 Greenville Avenue Dallas, TX 75231 (214) 748-7212
Date	1984
Availability	From local affiliates of the American Heart Association
Cost	No cost
Format	A boxed set of materials divided into (1) adult resources, including pamphlets, teacher guide, parent information, and videotape; and (2) children's resources, including videotape, audiotape, game, stethoscope, syringe, and plastic tubes
Health Content	Cardiac health, nutrition, and physical activity
Intended Audience	Preschool parents
Annotation	This curriculum is a boxed set of materials for adults and children in the classroom. The majority of the activities provided are developmentally appropriate and include an array of materials and activities for 3- to 5-year-olds. The approach includes a mix of teacher- and child-directed activities. Some activities, however, seem unrealistic for Head Start programs and inappropriate for this age group. Opportunities for parent involvement are provided although materials are at a high literacy level.

162

Title **Life Skills for Single Parents: A Curriculum Guide**

Author Beverly M. Uhlenberg and Cary E. Estrem

Publisher University of North Dakota
Home Economics and Nutrition
Box 8273 University Station
Grand Forks, ND 58202-8158

Date 1988

Availability Bureau of Educational Services and Applied Research
Box 8158 University Station
University of North Dakota
Grand Forks, ND 58202-8158

Cost Will ship at cost to reproduce and mail

Format Units of parent-interactive activities

Health Content Mental health, relationships, nutrition, stress, money management, parenting, conflict resolution

Intended Audience Preschool parents

Annotation This curriculum is strong in skill-building for parents who find themselves alone and raising children. It gives practical information about areas such as budgeting, nutrition, child development, communication, and building parental and child self-esteem. The curriculum is sensitive to the range of literacy skills among parents.

163

Title **Life Skills For Women in Transition**

Author Margaret Hunt and Constance Munro

Publisher U.S. Department of Education
Women's Educational Equity Act Program

Date 1982

Availability WEEA
Education Development Center, Inc.
55 Chapel Street
Newton, MA 02158-1060
(617) 969-7100 and (800) 225-4276

Cost $16.50 plus $4.75 for Workshop Guide

Format A two-volume set: classroom workbook and "how-to" workshop guide

Health Content Assertiveness, stress, and family communication

Intended Audience Preschool parents

Annotation Activities are brief and varied. The curriculum builds on the strengths of parents and is presented at appropriate literacy levels. It encourages positive health education and promotion and is attentive to the needs of adult learners.

164

Title	**Looking At Life**
Author	Research Assessment Management, Inc.
Publisher	Research Assessment Management, Inc. 1320 Fenwick Lane, Suite 105 Silver Spring, MD 20910 (310) 589-8242
Date	1986
Availability	Head Start Publications Center P.O. Box 26417 Alexandria, VA 22313-0417
Cost	No cost to Head Start programs
Format	Session plans provide guidance for the group leader and step-by-step directions for conducting the activities; information sheets are reproducible handouts for parents
Health Content	Relationship-building within families; caring for one's self
Intended Audience	Preschool parents
Annotation	This is a sound curriculum, which is responsive to the strengths of parents, providing opportunities for exploration. It is respectful of cultural differences and values and champions parents as the primary influence on their child's development. It also offers activities for parents' own growth, health, and wellness, apart from their role as parents.

165

Title **Parents and Children Getting A Head Start Against Drugs**

Author Sylvia Carter and Ura J. Oyemade

Publisher National Head Start Association (NHSA)

Date 1990 (rev.)

Availability National Head Start Association
1220 King Street, Suite 200
Alexandria, VA 22314
(703) 739-0875

Cost None

Format A stand-alone document with separate activities for children and parents; sections on parent involvement, training, and facilitator skills; 50 reproducible handouts

Health Content Parenting, family, community, and taking care of one's self

Intended Audience Preschool teachers

Annotation This curriculum is a valuable resource for working with Head Start parents. It builds on strengths and is respectful and responsive to parents and their primary role. It tackles hard issues in a frank and sensible manner. Curriculum materials may need to be adapted as they are presented at high literacy levels, particularly in role-playing skits and prepared letters for parent distribution.

166

Title **Systemic Training for Effective Parenting (STEP)**

Author Don Dinkmeyer and Gary McKay

Publisher American Guidance Service

Date 1989 (3rd Ed.)

Availability American Guidance Service
4201 Woodland Road, Box 99
Circle Pines, MN 55014-1796
(800) 328-2560

Cost $285.00

Format A boxed set of materials with a leader's manual, parent's handbook, booklet for integrating STEP with substance abuse prevention information, parent certificates, 2 video cassettes, and charts

Health Content Parenting, family life, reproductive health, substance abuse prevention

Intended Audience Preschool parents

Annotation This curriculum focuses on assisting parents with their parenting skills. Information is summarized, with easy reference checklists. Completion of the curriculum requires a lot of reading and writing for parents and may need substantial modification for a range of literacy and English-reading skills.

167

Title **Caring for Preschool Children**

Author Diane T. Dodge, Derry G. Koralek, and Peter Pizzolongo

Publisher Teaching Strategies, Inc.
P.O. Box 42243
Washington, DC 20015
(202) 362-7543

Date 1989

Availability Gryphon House, Inc.
P.O. Box 275
Mt. Rainier, MD 20712
(301) 779-6200

Cost $34.95 for Vols. I, II; $23.95 for Trainer's Guide

Format A supervised, self-instructional program consisting of 13 modules that follow the CDA competency areas, including modules on safety, health and families, with self-assessments, available in 2 volumes and a trainer's guide

Health Content Safety

Intended Audience Preschool teachers

Annotation This curriculum is aimed at helping teaching staff provide a safe and healthy environment for children. It follows the 13 competency areas for CDA and contains a strong section on why it is important for staff to have healthy habits.

168

Title **Essentials for Child Development Associates**

Author Carol B. Phillips, Ed.

Publisher Council for Early Childhood Professional Recognition

Date 1991

Availability Council for Early Childhood Professional Recognition
1718 Connecticut Avenue, NW, Suite 500
Washington, DC 20009
(202) 265-9090

Cost $30.00

Format A stand-alone document with more than 350 pages of self-study activities

Health Content Child development, safety, nutrition, mental health, family relationships

Intended Audience Preschool teachers

Annotation This curriculum focuses on 3 issues: a safe and healthy environment, positive ways to support a child's social and emotional development, and establishing productive relationships with parents. It provides a clear, step-by-step picture of appropriate practice in early childhood situations. Nutrition and safety are thoroughly covered, and the curriculum is sensitive to issues of diversity and gender bias.

169

Title **Health in Day Care: A Training Guide for Day Care Providers**

Author Judith Pokorni and Roxanne Kaufmann

Publisher Georgetown University Child Development Center

Date 1986

Availability Georgetown University Child Development Center
3800 Reservoir Road, NW
Washington, DC 20007
(202) 687-8635

Cost $25.00

Format This stand-alone document provides 2 to 3 training activities on each of 12 topics. The trainer's guide was developed to accompany Health in Day Care: A Manual for Day Care Providers, which provides comprehensive information for day care providers on major health and safety issues.

Health Content Safety

Intended Audience Preschool teachers

Annotation This curriculum provides staff with a variety of options for learning and skill-building, which include exercise, group discussion, and checklists. Special attention is given to the care of chronically ill children and adaptations for children with disabilities.

170

Title **Parents and Children Getting A Head Start Against Drugs**

Author Sylvia Carter and Ura J. Oyemade

Publisher National Head Start Association (NHSA)

Date 1990 (rev.)

Availability National Head Start Association
1220 King Street, Suite 200
Alexandria, VA 22314
(703) 739-0875

Cost None

Format A stand-alone document with separate activities for children and parents, sections on parent involvement, training, and facilitator skills; 50 reproducible handouts

Health Content Parenting, family, community, and taking care of one's self

Intended Audience Preschool teachers

Annotation This curriculum is a valuable resource for working with Head Start parents. It builds on strengths and is respectful and responsive to parents and their primary role. It tackles hard issues in a frank and sensible manner. Curriculum materials may need to be adapted, as they are presented at high literacy levels, particularly in role-playing skits and prepared letters for parent distribution.

171

Title	**As I Am**
Author	Ingrid Chalufour, Catherine Bell, Jane Weil, Amanda Dyer, and Barbara Peppey
Publisher	Action Opportunities, Inc. P.O. Box 562 Ellsworth, ME 04605
Date	1988
Availability	Head Start Publications Center P.O. Box 26417 Alexandria, VA 22313-0417
Cost	No cost to Head Start programs
Format	A 223-page stand-alone document with an introduction followed by 7 topical areas and several appendices
Health Content	Mental health issues, including self-esteem, coping with stress, building relationships with family and peers
Intended Audience	Preschool children
Annotation	*As I Am* is soundly rooted in developmentally appropriate practice, reflected both in its content and its methodology, presenting open-ended activities designed to increase one's knowledge base, change attitudes, and increase skill levels. Parent involvement is a key focus of the curriculum, and it meets Head Start Performance Standards for Mental Health. Resources are listed at the end of each of the curriculum's 7 sections. In addition, there are appendices with additional references, an observation form for working with children, and a curriculum goal cross reference chart. The curriculum deals effectively and openly with both diversity and equity.

172

Title

BABES: Beginning Alcohol and Addiction Basic Education Series

Author National Council on Alcoholism—Greater Detroit Area

Publisher National Council on Alcoholism—Greater Detroit Area

Date 1981; Rev. 1985

Availability National Council on Alcoholism—Greater Detroit Area
Southfield, MI 48075
(313) 443-1676

Cost $164.90

Format 7 lessons with an implementation guide

Health Content Mental health, decision making, substance abuse prevention

Intended Audience Preschool children

Annotation This curriculum focuses on decision making. The authors report that it can be adapted to children of any age. Stories are used to help children understand their feelings and learn to ask for help. It explores many kinds of relationships: siblings, friends, and parents. However, many of the activities are focused on right and wrong answers and concepts generally more appropriate for older children. Programs need to carefully consider whether the nature of the materials is in keeping with their philosophy and approach.

173

Title

Everybody Has A Body: Science From Head to Toe

Author Robert E. Rockwell, Robert A. Williams, and Elizabeth A. Sherwood

Publisher Gryphon House

Date 1992

Availability Gryphon House
3706 Otis Street
Mt. Rainier, MD 20712

Cost $14.95

Format Chapters organized around body parts; begins with information for staff, then activities for children

Health Content Body awareness, personal health, dental health

Intended Audience Preschool children

Annotation There are dozens of activities to do with children. Some will be particularly fun, such as tickling feet with feathers or darkening a room and shining flashlights through the hands. The authors also stress parent involvement, ways to use the curriculum with children with disabilities, personal safety, and developmentally appropriate practice.

174

Title **Facilitating Social Problem Solving With Children Ages Two Through Five: A Guide for Preschool Teachers**

Author Eleanor Muhlstein

Publisher Building Bridges Press

Date 1993

Availability Building Bridges Press
P.O. Box 1621
Cupertino, CA 95015-1621

Cost $6.95 + $1.25 postage and handling

Format 5 sections with introduction and resources

Health Content Conflict resolution

Intended Audience Preschool children

Annotation *Facilitating Social Problem Solving* is a 44-page curriculum that outlines a 5-step approach to conflict resolution. It is developmentally appropriate, with guidance given for reaching children at their levels. However, the curriculum does not give enough guidance in establishing the link between problem solving and parents.

175

Title **Fit For Me**

Author Merle B. Karnes

Publisher American Guidance Service

Date 1992

Availability American Guidance Service
4201 Woodland Road
Circle Pines, MN 55014-1796
(800) 328-2560

Cost $178.00

Format A boxed set of materials that includes a teacher's guide and 145 activity cards on stability, locomotion, and manipulation; 10 home activity letters, song cards, and an audiocassette

Health Content Deals with motor skill development only

Intended Audience Preschool children

Annotation The content area is age-appropriate for Head Start children. The program provides guidance on adapting activities for children with disabilities. However, the curriculum is limited by the approach, which requires that teachers model motor skills and children then repeat them. In addition, diversity and equity are not emphasized.

176

Title

Growing Up Strong: A Mental Wellness and Chemical Abuse Prevention Program for Preschoolers

Author

Center for Child and Family Development
Public Responsibility and Community Affairs
Continuing Education and Public Service
The University of Oklahoma
Norman, OK 73037-0005

Publisher

Oklahoma State Department of Mental Health
P.O. Box 53277, Capitol Station
Oklahoma City, OK 73152

Date

1986

Availability

The Center for Child and Family Development
University of Oklahoma College of Continuing Education
555 Constitution, Suite 221
Norman, OK 73037-0005
(405) 325-1446

Cost

$120.00

Format

22 specific lessons, mental health check list, teacher's guide, and parent's guide

Health Content

Mental health, tobacco and alcohol prevention, self-esteem

Intended Audience

Preschool children

Annotation

The authors view parents as an integral part of this curriculum for children. Discussion suggestions are very open-ended and great for language stimulation. In addition, the curriculum seems careful to show gender equity and both traditional and nontraditional families.

111

Title	**Head Start Nutrition Education Curriculum**
Author	Mary F. Lewis, Carol Byrd-Bredbenner, and Joan Bernstein
Publisher	Department of Health and Human Services/Administration for Children, Youth, and Families—Head Start Bureau
Date	1987
Availability	Head Start Publications Center P.O. Box 26417 Alexandria, VA 22313
Cost	No cost to Head Start programs
Format	A 300+ page, stand-alone document consisting of 9 units, each of which is approximately 30 pages long
Health Content	Nutrition
Intended Audience	Preschool children
Annotation	This curriculum is developmentally appropriate, emphasizing the importance of skill development and integrating language arts, music, pre-math skills, physical development, and arts in its approach to nutrition. The curriculum meets the Head Start Performance Standards for nutrition education, provides extensive references and resources, stresses parent involvement, and offers useful strategies for involving parents.

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17-8

Title	**Head Start on Dental Health Curriculum**
Author	American Dental Association/Bureau of Health Education and Audiovisual Services
Publisher	Department of Health and Human Services/Administration for Children, Youth, and Families—Head Start Bureau
Date	1985
Availability	Head Start Publications Center P.O. Box 26417 Alexandria, VA 22313-0417
Cost	No cost to Head Start programs
Format	10 lessons with photocopiable materials and home visit ideas for parents; a section on children with disabilities; puppet.
Health Content	Dental health, good nutrition, dental injury and first aid, visits to the dentist
Intended Audience	Preschool children
Annotation	The content areas are well-organized and provide children with opportunities for hands-on and self-initiated activities. The curriculum meets the Head Start Performance Standards for dental health and promotes parent involvement, using letters and handouts with activities that bridge the program and home. References consist of a list of national organizations. Although the curriculum does not specifically deal with issues of diversity and/or equity, there is a special section on helping children with disabilities.

179

Title **The Heart Treasure Chest**

Author American Heart Association, Texas Affiliate

Publisher American Heart Association
National Center
7320 Greenville Avenue
Dallas, TX 75231

Date 1984

Availability From local affiliates of the American Heart Association

Cost No cost

Format A boxed set of materials divided into (1) adult resources, including pamphlets, teacher guide, parent information, and videotape; and (2) children's resources, including videotape, audiotape, game, stethoscope, syringe, and plastic tubes

Health Content Cardiac health, nutrition, and physical activity

Intended Audience Preschool children

Annotation This curriculum is a boxed set of materials for adults and children in the classroom. The majority of the activities provided are developmentally appropriate and include an array of materials and activities for 3- to 5-year-olds. The approach includes a mix of teacher and child-directed activities. Some activities, however, seem unrealistic for Head Start programs and inappropriate for this age group. Opportunities for parent involvement are provided, although materials are at a high literacy level.

180

Title **Here We Go . . . Watch Me Grow**

Publisher Charlotte Hendricks and Connie J. Smith

Author ETR Associates

Date 1991

Availability ETR Associates
P.O. Box 1830
Santa Cruz, CA 95061-1830

Cost $29.95

Format A stand-alone document

Health Content Comprehensive coverage of traditional health topics

Intended Audience Preschool children

Annotation This curriculum has good breadth of content on traditional health topics. It is also strong on providing guidance and support for teachers to develop materials for learning centers. Some of the activities, however, will need to be adapted to be developmentally appropriate, and parent involvement activities will need to be added.

181

Title	**I Am Amazing**
Author	Kathryn Breighner and Deborah Rohe
Publisher	American Guidance Service
Date	1990
Availability	American Guidance Service 4201 Woodland Road Circle Pines, MN 55014-1796 (800) 328-2560
Cost	$250.00
Format	A boxed set of materials, which includes an activity manual, audiocassette, posters, card sets, and story cards for children
Health Content	Comprehensive coverage of traditional health topics
Intended Audience	Preschool children
Annotation	*I Am Amazing* has good breadth of content on traditional health topics. It also provides preschool children with concrete materials with which to work. The curriculum meets many of the Head Start Performance Standards and it includes clear step-by-step information for classroom staff. Some of the child activities will need to be adapted to be developmentally appropriate, and parent involvement activities will need to be added.

182

Title	**I Can Problem Solve: An Interpersonal Cognitive Problem-Solving Program**
Author	Myrna B. Shure·
Publisher	Research Press
Date	1992
Availability	Research Press 2612 N Mattis Avenue Champaign, IL 61821
Cost	$39.95
Format	A stand-alone document with 59 activities designed to help children "think" through conflict or problems
Health Content	Conflict resolution
Intended Audience	Preschool children
Annotation	This curriculum addresses skills that, in sequence, build upon one other to help children problem-solve. A section for parents shows them how to reinforce these skills outside of the classroom. Programs will need to adapt materials prepared for staff (scripts) and children (worksheets).

183

Title **I'm So Glad You Asked**

Author Marguaritte Sheehan and Patricia Newell

Publisher I'm So Glad You Asked

Date 1990

Availability I'm So Glad You Asked
P.O. Box 329
Amherst, MA 01004
(413) 549-3873

Cost $650.00; $550.00 for nonprofits

Format A set of materials, including manual, puppets, audiotape, slides, posters, and stickers

Health Content Mental health issues including self-esteem and substance abuse prevention

Intended Audience Preschool children

Annotation *I'm So Glad You Asked* is a well-organized substance abuse curriculum, which is easy to follow and stresses the importance of strengthening the parent-teacher-child relationship. Programs need to carefully consider whether the majority of the materials are in keeping with their philosophy and approach.

184

Title **Keeping Kids Safe: A Child Sexual Abuse Prevention Manual**

Author Pnina Tobin and Susan L. Farley

Publisher Children's Self Help Project
3368 22nd Street
San Francisco, CA 94110
(415) 826-9050

Date 1990

Availability Learning Publications, Inc.
P.O. Box 1338
Holmes Beach, FL 34218-1338
(813) 778-6651

Cost $19.95

Format A stand-alone document, with 2 units for preschoolers, 2 units for elementary age children, and chapters on the need for prevention, intervention, classroom management, and working with parents, teachers, and schools

Health Content Physical and sexual abuse prevention

Intended Audience Preschool children

Annotation This curriculum offers many activities for physical and sexual abuse prevention, to be addressed by an "expert" rather than the classroom teacher. The language and content are developmentally appropriate, and parent involvement is approached through informational meetings and lessons.

185

Title **Keeping the Peace: Practicing Cooperation and Conflict Resolution With Preschoolers**

Author Susanne Wichert

Publisher New Society Publishers

Date 1989

Availability New Society Publishers
P.O. Box 582
Santa Cruz, CA 95061

Cost $12.95

Format 9 chapters with 30 activities, bibliography, resources

Health Content Conflict resolution

Intended Audience Preschool children

Annotation This book provides detailed and useful information about helping children to develop conflict resolution skills. It gives concrete steps in looking at the environment and reducing potential conflict. It stresses inclusion of parents.

186

Title **The Learn Not to Burn Preschool Program**

Author Learn Not to Burn Foundation

Publisher Learn Not to Burn Foundation

Date 1991

Availability Learn Not to Burn Foundation
National Fire Protection Association
One Batterymarch Park
Quincy, MA 02269-9101
(617) 984-7286

Cost $16.00 for total package;
$15.40 for 25-99 packages; $14.20 for 100+ packages

Format A 60-page teacher's guide with easy-to-follow lesson plans, letters to copy for parents, coloring pictures to copy for children, and an audiotape with songs about fire and burn prevention

Health Content Fire safety and prevention

Intended Audience Preschool children

Annotation This curriculum has a single topic focus—dealing with fire safety and prevention issues. It places emphasis on specific fire safety knowledge and gives children practical skills. The lesson format is easy to follow but many activities will need to be adapted to be developmentally appropriate for 4-year-olds. Programs will need to carefully consider whether the nature of the materials is in keeping with their philosophy and approach.

187

Title **Preschool Stress Relief Project**

Author Gloria Humphrey and Jennie C. Trotter

Publisher Wholistic Stress Control Institute, Inc.

Date 1988

Availability Wholistic Stress Control Institute, Inc.
P.O. Box 42481
Atlanta, GA 30311
(404) 344-2021

Cost $450.00; $350.00 to nonprofits

Format A stand-alone document and audiovisuals

Health Content Strategies for dealing with anger, frustration, and stress

Intended Audience Preschool children

Annotation The curriculum includes videos, puppets, and skits, which may be used in large group or small group sessions. It provides children with strategies for coping with anger, frustration, and stress, including basic yoga. Many activities may not be developmentally appropriate as they are primarily teacher-directed, offering stickers as rewards and utilizing prepared worksheets and paper and pencil tasks.

188

Title **Ready, Set, Grow**

Author Paula Peterson

Publisher Peterson Publishing

Date 1984

Availability Peterson Publishing
P.O. Box 65144
St. Paul, MN 55175

Cost $40.00

Format A three-hole-punched, shrink-wrapped, stand-alone document

Health Content Comprehensive coverage of traditional health topics

Intended Audience Preschool children

Annotation While the focus is on teacher-directed activities in large groups, this curriculum provides good guidance for teachers to involve parents in nutrition activities, as well as an emphasis on parent involvement in general. Many of the child activities, however, need to be modified to be developmentally appropriate.

189

Title **Second Step: A Violence Prevention Curriculum**

Author Kathy Beland

Publisher Committee for Children

Date 1991

Availability Committee for Children
172 20th Avenue
Seattle, WA 98122
(800) 634-4449

Cost $245.00; free 30-day preview

Format Teachers's guide, 2 puppets, audiocassette, large black and white photographs on matte board

Health Content Violence prevention, conflict resolution

Intended Audience Preschool children

Annotation This kit provides materials aimed at increasing skill levels in empathy, impulse control, problem-solving, appropriate social behaviors, and anger management. The authors claim that the curriculum can be easily integrated into an early childhood program, although the lessons are 15-25 minutes each and geared to a group of 10 children.

190

Title **Words Can Hurt You: Beginning a Program of Anti-Bias Education**

Author Barbara J. Thomson

Publisher Addison-Wesley Publishing Company

Date 1993

Availability Addison-Wesley Publishing Company
1 Jacob Way
Reading, MA 01867
(617) 944-3700

Cost $20.00

Format A stand-alone curriculum of activities, with appendices

Health Content Mental health, relationships, disability awareness, and multicultural diversity

Intended Audience Preschool children

Annotation This curriculum tackles many areas of diversity, including differences in families and ethnicity, tolerance, and sensitivity for persons with disabilities, as well as understanding and breaking through sex-role stereotyping. There are some particularly interesting activities, such as re-creating an underground railway. Some of the materials may need to be adapted in order to be developmentally appropriate.

191

Title	**YMCA Preschool Movement and Health Program**
Author	Rae Pica and Wendy Fox
Publisher	Human Kinetics Publishers, Inc. Champaign, IL 61825-5077 (217) 351-5076
Date	1991
Availability	YMCA Program Store P.O. Box 5077 Champaign, IL 61825-5077
Cost	$47.00
Format	A 145-page stand-alone document with guidance for teachers and materials for parents
Health Content	Movement, physical activity, and some information on general health and nutrition
Intended Audience	Preschool children
Annotation	The curriculum has a single-issue content area dealing with movement and physical activity for children 3 to 5 years old. It includes opportunities for parents and can be easily modified or adapted in response to the varying needs of children or their parents. It details the developmental differences between 3-, 4-, and 5-year olds, with guidance on how to handle these differences.

Organizations for Health Education and Promotion

The following health resources can be contacted for further information and materials. Many of the groups have free publications catalogs. All are listed in the index by subject and title. Although there is no annotation for each listing, the title alone should indicate the health focus of the organization.

In addition to the resources listed, contact county extension services, local and state public health departments (all located under "Government" in your local telephone directory), local colleges and universities, local police and fire departments, and local affiliates of such national health organizations as the American Lung Association and American Heart Association, for additional materials.

192

Name **Active Parenting, Inc.**

Address 810 Franklin Court, Suite B
Marrietta, GA 30067

Telephone (404) 429-0565

193

Name **American Academy of Pediatrics**

Address 141 Northwest Point Boulevard
P.O. Box 927
Elk Grove Village, IL 60007

Telephone (800) 433-9016

194

Name **American Cancer Society, Inc.**

Address 19 West 56th Street
New York, NY 10019

Telephone (800) 227-2345

195

Name **American Diabetes Association**

Address 505 Eighth Avenue, 2nd Floor
New York, NY 10018

Telephone (800) 232-3472

196

Name **American Heart Association**

Address 7272 Greenville Avenue
Dallas, TX 75231-4596

Telephone (800) 242-1793

197

Name **American Holistic Health Association**

Address P.O. Box 17400
Anaheim, CA 92817

Telephone (714) 779-6152

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198

Name **American Indian Health Care Association**

Address 2422 Arden Way
Sacramento, CA 95825

Telephone (916) 920-0313

199

Name **American Lung Association**

Address 1740 Broadway
New York, NY 10019

Telephone (212) 315-8700

200

Name **American Public Health Association**

Address 1015 15th Street, NW
Washington, DC 20005

Telephone (202) 789-5600

201

Name **American Red Cross**

Address 17th and D Streets, NW
Washington, DC 20006

Telephone (202) 737-8300

202

Name **American School Health Association**

Address P.O. Box 708
7263 State Route 43
Kent, OH 44240-0708

Telephone (216) 678-1601

203

Name **Arab-American and Chaldean Council**

Address 111 East Kirby
Detroit, MI 48202

Telephone (313) 874-2320

204

Name **Aspira Association, Inc.**

Address 1112 16th Street, NW
Washington, DC 20036

Telephone (202) 835-3600

205

Name **Association for Children with Learning Disabilities**

Address 4156 Library Road
Pittsburgh, PA 15234

Telephone (412) 341-1515

206

Name **Association for the Advancement of Health Education**

Address 1900 Association Drive
Reston, VA 22091-1599

Telephone (703) 476-3437

207

Name **Association for the Care of Children's Health**

Address 3615 Wisconsin Avenue, NW
Washington, DC 20016

Telephone (202)244-1801

208

Name **Association of Asian/Pacific Community Health Organizations**

Address 1212 Broadway, Suite 730
Oakland, CA 94612

Telephone (510) 272-9536

209

Name **Asthma and Allergy Foundation of America**

Address 1125 Fifteenth Street, NW, Suite 502
Washington, DC 20005

Telephone (202) 466-7643

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210

Name **Black Community Crusade for Children**

Address 25 E Street, NW
Washington, DC 20001

Telephone (800) ASK-BCCC

211

Name **Center for Mind-Body Studies**

Address 5225 Connecticut Avenue, NW, Suite 414
Washington, DC 20015

Telephone (202) 966-7338

212

Name **Centers for Disease Control Public Inquiries Office**

Address 1600 Clifton Road, NE
Atlanta, GA 30333

Telephone (404) 639-3534

213

Name **Child Health Alert**

Address P.O. Box 338
Newton Highlands, MA 02161

Telephone No telephone number listed

214

Name **Children's Defense Fund**

Address 25 E Street, NW
Washington, DC 20001

Telephone (202) 628-8787

215

Name **Clearinghouse on Family Violence Information**

Address P.O. Box 1182
Washington, DC 20013

Telephone (703) 821-2086

239

216

Name **Healthy Mothers, Healthy Babies Coalition**

Address 409 12th Street, SW
Washington, DC 20024

Telephone (202) 863-2458

217

Name **Hispanic Health Council**

Address 96 Cedar Street
Hartford, CT 06106

Telephone (203) 527-0856

218

Name **Institute on Health Care for the Poor and Underserved/Meharry Medical College**

Address 1005 D.B. Todd Boulevard
Nashville, TN 37208

Telephone (800) 669-1269; (615) 327-6819

219

Name **March of Dimes Birth Defects Foundation**

Address 1275 Mamaroneck Avenue
White Plains, NY 10605

Telephone (914) 428-7100

220

Name **Maternal and Child Health Bureau**

Address 5600 Fishers Lane, Room 18A-39
Rockville, MD 20857

Telephone (301) 443-6600

221

Name **Mexican American Legal Defense and Educational Fund**

Address 634 South Spring Street, 11th Floor
Los Angeles, CA 90014

Telephone (213) 629-2512

222

Name **National AIDS Information Clearinghouse**

Address P.O. Box 6003
Rockville, MD 20850

Telephone (800) 458-5231; (800) 342-AIDS (hotline)

223

Name **National Association for Sickle Cell Disease**

Address 3345 Wilshire Boulevard, Suite 1106
Los Angeles, CA 90010-1880

Telephone (800) 421-8453

224

Name **National Association for the Education of Young Children (NAEYC)**

Address 1509 16th Street, NW
Washington, DC 20036-1426

Telephone (800) 424-2460; (202) 232-8777

225

Name **National Black Child Development Institute**

Address 1023 15th Street, NW, Suite 600
Washington, DC 20005

Telephone (202) 387-1281

226

Name **National Black Nurses Association**

Address P.O. Box 1823
Washington, DC 20013-1823

Telephone (202) 393-6870

227

Name **National Black Women's Health Project**

Address 1237 Ralph D. Abernathy Boulevard, SW
Atlanta, GA 30310

Telephone (404) 758-9590

228

Name **National Cancer Institute**
Cancer Information Resource Branch

Address 9000 Rockville Pike, Building 31, Room 10A-24
Bethesda, MD 20892

Telephone (800) 4-CANCER

229

Name **National Center for Children in Poverty**
Columbia University School of Public Health

Address 154 Haven Avenue
New York, NY 10032

Telephone (212) 927-8793

230

Name **National Center for Education in Maternal and Child Health (NCEMCH)**

Address 38th and R Streets, NW
Washington, DC 20057

Telephone (703) 821-8955

231

Name **National Clearinghouse for Alcohol and Drug Information**

Address P.O. Box 2345
Rockville, MD 20852

Telephone (800) 729-6686; (301) 468-2600

232

Name **National Clearinghouse on Child Abuse and Neglect Information**

Address P.O. Box 1182
Washington, DC 20013

Telephone (703) 821-2086

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233

Name **National Coalition Against Domestic Violence (NCADV)**

Address P.O. Box 18749
Denver, CO 80128-0749

Telephone (303) 839-1852

234

Name **National Coalition of Hispanic Health and Human Services Organizations (COSSMHO)**

Address 1501 Sixteenth Street, NW
Washington, DC 20036

Telephone (202) 387-5000

235

Name **National Committee for the Prevention of Child Abuse**

Address 332 S. Michigan Avenue, Suite 1600
Chicago, IL 60604

Telephone (312) 663-3520

236

Name **National Council of La Raza**

Address 810 First Street, NE, Suite 600
Washington, DC 20002-4205

Telephone (202) 289-1380

237

Name **National Dairy Council**

Address 10255 W. Higgins Road, Suite 900
Rosemont, IL 60018-1133

Telephone (708) 803-2000

238

Name **National Health/Education Consortium National Commission to Prevent Infant Mortality**

Address 330 C Street SW, Switzer Building, Room 2014
Washington, DC 20201

Telephone (202) 205-8364

234

239

Name **National Health Information Center**

Address P.O. Box 1133
Washington, DC 20013-1133

Telephone (800) 336-4797; (202) 336-4797

240

Name **National Information Center for Children and Youth with Disabilities**

Address Box 1492
Washington, DC 20013

Telephone (800) 695-0285

241

Name **National Medical Association**

Address 9000 Rockville Pike, EPN Room 330
Bethesda, MD 20892

Telephone (301) 496-8520

242

Name **National Migrant Resource Program, Inc.**

Address 2512 South IH-35, Suite 220
Austin, TX 78704

Telephone (512) 447-0770

243

Name **National Pediculosis Association**

Address P.O. Box 149
Newton, MA 02161

Telephone (800) 446-4672

244

Name **National Rural Health Association**

Address 301 East Armour Boulevard, Suite 420
Kansas City, MO 64111

Telephone (816) 756-3140

245

Name **National SAFE KIDS Campaign**

Address 111 Michigan Avenue, NW
Washington, DC 20010-2970

Telephone (202) 939-4993

246

Name **National Wellness Association**
(publisher of *Wellness Management Newsletter*)

Address South Hall, 1319 Fremont Street
Stevens Point, WI 54481

Telephone (715) 346-2172

247

Name **National Women's Health Network**

Address 1325 G Street, NW
Washington, DC 20005

Telephone (202) 347-1140

248

Name **Native American Women's Health Education Resource Center**

Address P.O. Box 5072
Lake Andes, SD 57356

Telephone (605) 487-7072

249

Name **Office of Minority Health Resource Center**

Address P.O. Box 37337
Washington, DC 20013

Telephone (800) 444-6472

250

Name **Office of Smoking and Health**

Address 5600 Fishers Lane, Room 1-16
Rockville, MD 20857

Telephone (301) 443-1690

251

Name **Pediatric AIDS Foundation**

Address 1311 Colorado Avenue
Santa Monica, CA 90404

Telephone (310) 395-9051

252

Name **Rural America Initiative**

Address 919 Main Street, Suite 112
Rapid City, SD 57701

Telephone (605) 341-3339

253

Name **Sex Information and Education Council of the United States (SIECUS)**

Address 130 West 42nd Street, Suite 2500
New York, NY 10025

Telephone (212) 819-9770

254

Name **Society for Public Health Education, Inc. (SOPHE)**

Address 2001 Killebrew Drive, Suite 340
Minneapolis, MN 55425-1882

Telephone (612) 854-0035

255

Name **U.S. Consumer Product Safety Commission**

Address Publications Request—CPSC
Washington, DC 20207

Telephone (800) 638-2772

256

Name **U.S. Department of Agriculture/Food and Nutrition Information Center**

Address 10301 Baltimore Boulevard, Room 304
Beltsville, MD 20705-2351

Telephone (301) 504-5719

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257

Name **U.S. Department of Education/Office of Educational Research and Improvement**

Address 555 New Jersey Avenue, NW
Washington, DC 20208

Telephone (202) 219-1651

258

Name **U.S. Department of Health and Human Services**

Address 8201 Greensboro Drive, Suite 600
McLean, VA 22102

Telephone (703) 821-8955, Ext. 254

259

Name **Wellness Councils of America**

Address 7101 Newport Avenue, Suite 311
Omaha, NE 68152-2175

Telephone (402) 572-3590

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SECTION III

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SECTION IV

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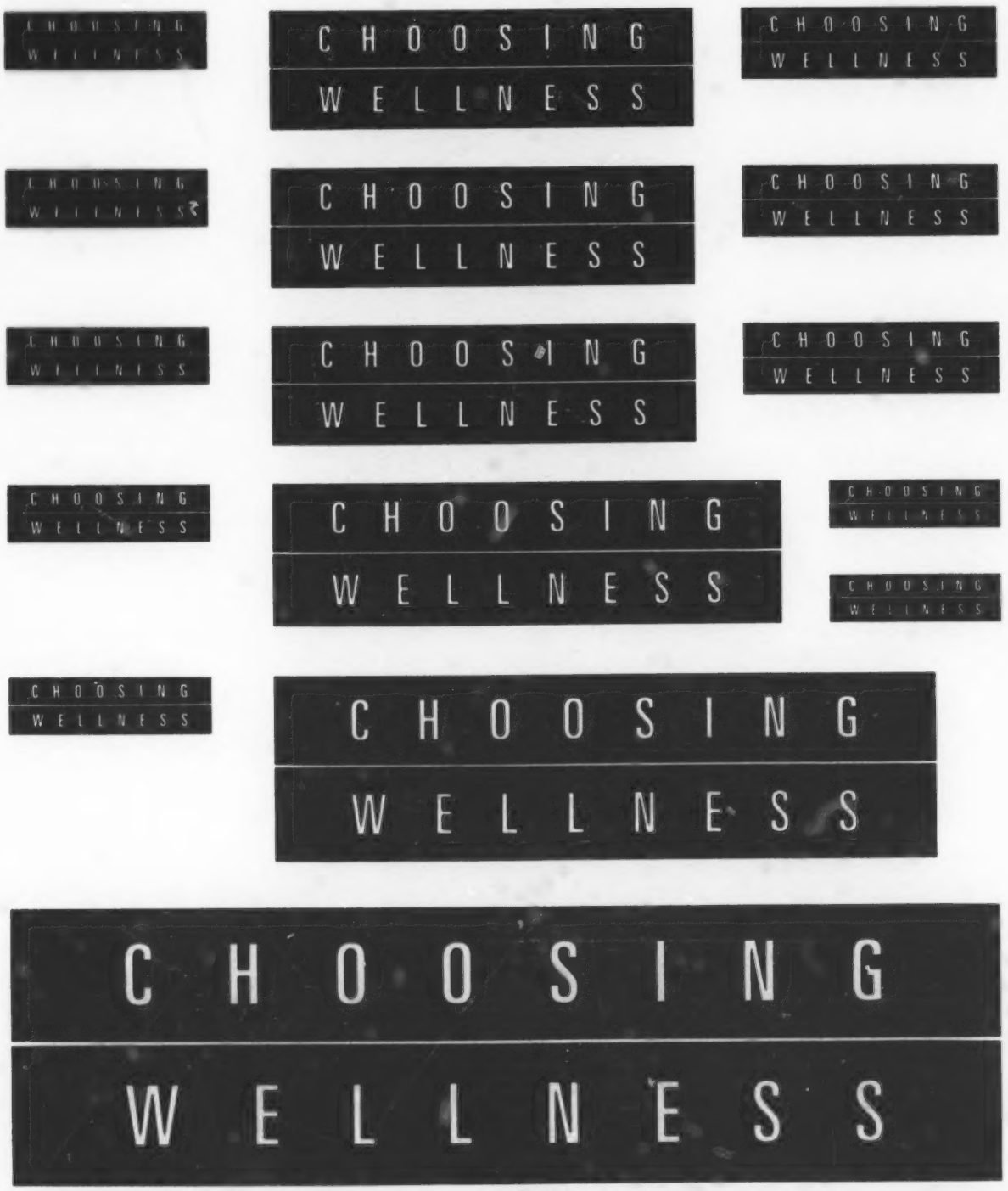

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